

# **DRAFT BACKGROUND REVIEW DOCUMENT**

## ***IN VITRO* ACUTE TOXICITY TEST METHODS**

**National Toxicology Program (NTP) Interagency Center for the Evaluation of  
Alternative Toxicological Methods (NICEATM)**

**March 17, 2006**

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**LIST OF ACRONYMS AND ABBREVIATIONS**

A-CUTE-TOX	A-Cute-Tox Project (EU Research & Development Integrated Project)
ASTDR	Agency for Toxic Substances and Disease Registry
ASTM	American Society for Testing and Materials
ATC	Acute Toxicity Class
ATCC	American Type Culture Collection
BBB	Blood:brain barrier
BRD	Background Review Document
CAS	Chemical Abstracts Service
CASRN	Chemical Abstracts Service Registry Number
CPSC	U.S. Consumer Product Safety Commission
CTFA	Cosmetic, Toiletries and Fragrance Association
CV	Coefficient of Variation
°C	Degrees Celsius
DOD	U.S. Department of Defense
DOT	U.S. Department of Transportation
EC	European Commission
EC/HO	European Commission/British Home Office
ECETOC	European Centre for Ecotoxicology and Toxicology Of Chemicals
ECVAM	European Center for the Validation of Alternative Methods
EDIT	Evaluation-guided development of new <i>in vitro</i> tests
EPA	U.S. Environmental Protection Agency
EU	European Union
FAL	FRAME Alternatives Laboratory
FDA	U.S. Food and Drug Administration
FR	Federal Register

FRAME	Fund for the Replacement of Animals in Medical Experiments
GHS	Globally Harmonized System
GLP	Good Laboratory Practice
HSDB	Hazardous Substances Database
IC <sub>50</sub>	Inhibitory concentration producing 50% inhibition of the endpoint measured
ICCVAM	Interagency Coordinating Committee on the Validation of Alternative Methods
IIVS	Institute for In Vitro Sciences
INVITTOXX	<i>In Vitro</i> Techniques in Toxicology (ERGATT FRAME ECVAM Data bank)
IRAG	Interagency Regulatory Alternatives Group
K <sub>ow</sub>	Octanol-Water Partition Coefficient
LC	Lethal concentration
LD <sub>50</sub>	Dose that produces lethality in 50% of test animals
MEIC	Multicentre Evaluation of <i>In Vitro</i> Cytotoxicity
NCS	Newborn calf serum
NHK	Normal human epidermal keratinocytes
NICEATM	National Toxicology Program Center for the Evaluation of Alternative Toxicological Methods
NIEHS	National Institute of Environmental Health Sciences
NIH	National Institutes of Health
NIOSH	U.S. National Institute for Occupational Safety and Health
NLM	National Library of Medicine
NR	Neutral red
NRU	Neutral red uptake
NTP	U.S. National Toxicology Program
OD	Optical density

OECD	Organisation for Economic Cooperation and Development
OPPTS	EPA Office of Prevention, Pesticides and Toxic Substances
OSHA	U.S. Occupational Safety & Hazards Administration
PC	Positive control
QA	Quality Assurance
RC	Registry of Cytotoxicity
RTECS	Registry of Toxic Effects for Chemical Substances
SD	Standard deviation
SMT	Study Management Team (NICEATM/ECVAM validation study)
3T3	BALB/c mouse fibroblasts, clone A31 (ATCC # CCL-163)
TSCA	Toxic Substances Control Act
UDP	Up-and-Down Procedure
UN	United Nations
VC	Vehicle control
WHO	World Health Organization
ZEBET	German Center for Documentation and Evaluation of Alternative Methods to Animal Experiments

## ACKNOWLEDGEMENTS

*The following individuals are acknowledged for their contributions to their vitro acute toxicity test method review process.*

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David Morse, Ph.D.  
Thomas Umbreit, Ph.D.

#### **National Institute for Occupational Safety & Health (NIOSH)**

Stephen Reynolds, Ph.D.

#### **National Institute of Environmental Health Sciences (NIEHS)**

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*NICEATM gratefully acknowledges the generous contributions of the individuals who directly participated in the NICEATM/ECVAM Validation Study. Their time and efforts are greatly appreciated.*

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## PREFACE

The Institute of Medicine estimates that more than 4 million poisonings occur annually in the United States (Institute of Medicine 2004). In 2001, 30,800 deaths placed poisoning as the second leading cause of injury-related death behind automobile accidents (42,433 deaths) (Institute of Medicine 2004). In order to ensure that all potentially hazardous substances have proper warning labels, regulatory agencies require determination of acute toxicity hazard potential of substances and products. This determination for oral acute toxicity hazard is currently made using a test that requires laboratory rats. Historically, lethality estimated by the LD<sub>50</sub> (i.e., the dose of a test substance that produces death in 50% of the animals tested) has been a primary toxicological endpoint in acute toxicity tests.

The conventional LD<sub>50</sub> acute oral toxicity *in vivo* test method has been modified in various ways to reduce and refine<sup>1</sup> animal use in toxicity testing (OECD 2001a, c, d; EPA 2002a). Most recently, the LD<sub>50</sub> was replaced, for hazard classification testing purposes, with the UDP, based on an Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM) technical evaluation and formal ICCVAM recommendations (ICCVAM 2000, 2001c). This method now reduces animal use by over 70% compared to the previous method.

In 1999, at the request of the U.S. Environmental Protection Agency (EPA) Office of Pesticides, Prevention, and Toxic Substances, ICCVAM reviewed the validation status of *in vitro* methods for estimating acute oral toxicity. This request was based on studies published in recent years that showed a correlation between *in vitro* and *in vivo* acute toxicity. *In vitro* cytotoxicity methods have been evaluated as another means to reduce and refine the use of animals and these methods may be helpful in predicting *in vivo* acute toxicity. Since moving the starting dose closer to the LD<sub>50</sub> reduces the number of animals necessary for the acute

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<sup>1</sup> A reduction alternative is a new or modified test method that reduces the number of animals required. A refinement alternative is a new or modified test method that refines procedures to lessen or eliminate pain or distress in animals or enhances animal well-being (ICCVAM 2003).



oral systemic toxicity test, the use of *in vitro* cytotoxicity assays to predict a starting dose close to the LD<sub>50</sub> may reduce animal use.

In October of 2000, the International Workshop on *In Vitro* Methods for Assessing Acute Systemic Toxicity sponsored by the National Toxicology Program (NTP), the National Institute of Environmental Health Sciences (NIEHS) and the EPA was convened in Arlington, VA. The Organizing Committee invited 33 expert scientists from academia, industry, and government agencies to participate in the Workshop. Invited scientific experts and ICCVAM agency scientists were assigned to one of four Breakout Groups and prepared recommendations on the following:

- *In Vitro* Screening Methods for Assessing Acute Toxicity
- *In Vitro* Methods for Toxicokinetic Determinations
- *In Vitro* Methods for Predicting Organ Specific Toxicity
- Chemical Data Sets for Validation of *In Vitro* Acute Toxicity Test Methods

Workshop participants concluded that none of the proposed *in vitro* methods had been formally evaluated for reliability and relevance, and that their usefulness and limitations for generating information to meet regulatory requirements for acute toxicity testing had not been adequately assessed. However, an *in vitro* approach proposed by the German Center for Documentation and Evaluation of Alternative Methods to Animal Experiments (ZEBET) was recommended for rapid adoption so that data could be generated to establish its usefulness with a large number of chemicals (ICCVAM 2001a). In addition, a separate *Guidance Document on Using In Vitro Data to Estimate In Vivo Starting Doses for Acute Toxicity* (ICCVAM 2001b) was prepared to provide sample cytotoxicity protocols and instructions for using *in vitro* data to predict starting doses for acute *in vivo* systemic toxicity tests.

ICCVAM, which is charged with coordinating the technical evaluations of new, revised, and alternative test methods with regulatory applicability (ICCVAM Authorization Act of 2000, Public Law 106-545; available: <http://iccvam.niehs.nih.gov/about/PL106545.pdf>), agreed that *in vitro* basal cytotoxicity test methods should have a high priority for evaluation. The

National Toxicology Program (NTP) Center for the Evaluation of Alternative Toxicological Methods (NICEATM) collaborated with the European Center for the Validation of Alternative Methods (ECVAM), a component of the European Commission's Joint Research Centre, to further characterize the usefulness of *in vitro* cytotoxicity assays as predictors of starting doses for acute oral lethality assays. NICEATM and ECVAM designed a multi-laboratory validation study to evaluate the performance of two standardized *in vitro* basal cytotoxicity test methods using 72 reference substances with the ZEBET approach of using the Registry of Cytotoxicity (RC) regression model. Based on the procedures described in the *Guidance Document* (ICCVAM 2001b), the validation study used two mammalian cell types (i.e., BALB/c 3T3 mouse fibroblasts [3T3] and a primary normal human epidermal keratinocytes [NHK]) for *in vitro* basal cytotoxicity test methods with a neutral red uptake (NRU) cell viability endpoint to predict starting for acute oral systemic toxicity test methods. The inclusion of human cells in the validation study also implements another workshop recommendation, that of evaluating whether cytotoxicity in human or rodent cells can be used to predict human acute toxicity.

The objectives identified for the validation study were to:

- further standardize and optimize two *in vitro* NRU cytotoxicity protocols using 3T3 cells or NHK cells in order to maximize intra- and inter-laboratory reproducibility
- refine the prediction model drawn from the ZEBET approach
- assess the accuracy of the two standardized *in vitro* basal cytotoxicity test methods for estimating rodent oral LD<sub>50</sub> values across the five Globally Harmonized System of Classification and Labelling of Chemicals (GHS; UN 2005) categories of acute oral toxicity as well as unclassified toxicities and estimating human lethal serum concentrations
- estimate the reduction and refinement in animal use achievable from using *in vitro* basal cytotoxicity assays as one of the factors of the weight-of-evidence to identify starting doses for specific *in vivo* acute toxicity tests

- generate high quality *in vivo* lethality and *in vitro* cytotoxicity databases that can be used to support the investigation of other *in vitro* test methods necessary to improve the prediction of acute systemic toxicity

Scientists assembled for the ICCVAM-sponsored scientific peer review panel meeting (“Panel”) on May 23, 2006 will independently assess the usefulness and limitations of the *in vitro* basal cytotoxicity test methods to predict starting doses for acute oral systemic toxicity test methods. The Background Review Document (BRD) on the two *in vitro* NRU test methods prepared by NICEATM and provided to the peer review panel and the public contains:

1. comprehensive summaries of the data generated in the validation study
2. an analysis of the accuracy and reliability of the test method protocols
3. related information characterizing the potential animal savings produced by using the *in vitro* basal cytotoxicity test methods as adjuncts to specific acute systemic toxicity test methods

The Panel will also evaluate draft test method performance standards, protocols, and draft ICCVAM recommendations. The public is invited to provide comments on the BRD and other documents and to attend the Panel meeting. Prior to this meeting, any public comments provided about the documents will be provided to the Panel for their consideration. The BRD can be obtained from the ICCVAM/NICEATM Web site (<http://iccvam.niehs.nih.gov>) or by contacting NICEATM.

Following the conclusion of the Panel meeting, the ICCVAM and its Acute Toxicity Working Group (ATWG) will consider the Panel report, the performance standards for the use of *in vitro* basal cytotoxicity test methods to predict starting doses for acute systemic toxicity test methods, and any public comments in preparing its final test method recommendations for these *in vitro* basal cytotoxicity test methods. These recommendations will be made available to the public and provided to the U.S. Federal agencies for consideration, in accordance with the ICCVAM Authorization Act of 2000 (Public Law 106-545).

On behalf of the ICCVAM, we gratefully acknowledge the many contributions of all who participated in the *in vitro* cytotoxicity validation study and those who assisted in the preparation of the documents evaluated at the peer review meeting. We extend a special thanks to the participating laboratory Study Directors and scientists who worked diligently to provided critical data and information. We also thank the ECVAM scientists who participated in the management of the validation study and who provided valuable information, comments, and opinions throughout the study. The efforts of the ATWG members were instrumental in assuring a complete and informative BRD. The efforts of the NICEATM staff in coordinating the validation study, providing timely distribution of information, and preparing the various documents are acknowledged and appreciated. We especially acknowledge Dr. Judy Strickland and Mr. Michael Paris for their coordination of the validation study and preparation of the BRD and other documents.

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*March 17, 2006*

## EXECUTIVE SUMMARY

This Background Review Document (BRD) describes the results of a validation study conducted to characterize two *in vitro* basal cytotoxicity tests for determining starting doses for acute oral systemic toxicity assays. The purpose of these tests is to reduce the total number of animals needed for in the *in vivo* tests. As part of this study, methods for two *in vitro* neutral red uptake (NRU) assays using mouse fibroblast (BALB/c) 3T3 cells or normal human epidermal keratinocytes (NHK) were standardized and optimized, the accuracy and validity of the tests were determined using reference chemicals of various toxicities, and computer simulation models were used to estimate the potential reduction in animal usage that could be accomplished by the use of these assays. In addition, high quality *in vivo* lethality and *in vitro* cytotoxicity databases were generated that may be useful in other validation studies for *in vitro* toxicity tests.

The results of the study showed that the 3T3 and NHK NRU test methods are not sufficiently accurate as stand-alone methods to correctly predict acute oral toxicity. However, based on computer simulations for the reference substances tested in this study, the use of these *in vitro* basal cytotoxicity test methods for the selection of starting doses for *in vivo* testing has the potential to reduce both the numbers of animals needed and animal deaths compared to the default procedures.

### ***Introduction and Rationale***

Although *in vitro* basal cytotoxicity test methods are not currently regarded as suitable replacements for acute oral systemic toxicity assays (Spielmann et al. 1999; ICCVAM 2001a), such test methods have been evaluated as a means to reduce and refine<sup>2</sup> the use of animals in acute oral systemic toxicity testing. In 1983, an international effort, the Multicentre Evaluation of *In Vitro* Cytotoxicity (MEIC), was initiated to evaluate the relationship of *in vitro* cytotoxicity to acute *in vivo* toxicity. Tests of 50 substances in 61 *in*

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<sup>2</sup> A reduction alternative is a new or modified test method that reduces the number of animals required. A refinement alternative is a new or modified test method that refines procedures to lessen or eliminate pain or distress in animals or enhances animal well-being (ICCVAM 2003).

*vitro* assays identified a battery of three human cell line assays that were highly correlated to human lethal blood concentrations. The Registry of Cytotoxicity (RC), a database of 347 substances that currently consists of *in vivo* acute toxicity data from rats and mice and *in vitro* cytotoxicity data from multiple cell lines, was published in 1998 (Halle 1998). A regression formula (the RC millimole regression) constructed from these data was proposed by ZEBET, the German National Center for the Documentation and Evaluation of Alternative Methods to Animal Experiments, as a method to reduce animal use by identifying the most appropriate starting doses for acute oral systemic toxicity tests (Halle 1998; Spielmann et al. 1999). These initiatives (and others) to use *in vitro* cytotoxicity test methods to reduce animal use in acute toxicity testing were evaluated by the International Workshop on *In Vitro* Methods for Assessing Acute Systemic Toxicity in October 2000 (“Workshop 2000”; ICCVAM 2001a). This workshop was organized by the Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM) and the National Toxicology Program (NTP) Interagency Center for the Evaluation of Alternative Toxicological Methods (NICEATM).

ICCVAM recommended (ICCVAM 2001a) further evaluation of the use of *in vitro* cytotoxicity data as one of the factors used to estimate starting doses for *in vivo* acute lethality studies based on preliminary information that this approach could reduce the number of animals used in *in vivo* studies (i.e., reduction), minimize the number of animals that receive lethal doses (i.e., refinement), and avoid underestimating hazard. To assist in the adoption and implementation of the ZEBET approach, the *Guidance Document on Using In Vitro Data to Estimate In Vivo Starting Doses for Acute Toxicity* (hereafter referred to as *Guidance Document*; ICCVAM 2001b) was prepared by ICCVAM with the assistance of several workshop participants.

ICCVAM concurred with the Workshop 2000 recommendation that near-term validation studies should focus on two standard basal cytotoxicity assays: one using a human cell system and one using a rodent cell system. Historical data for *in vitro* cytotoxicity testing using 3T3 cells is available through other publications (e.g., Balls et al. 1995; Brantom et al. 1997; Gettings et al. 1991, 1994a, 1994b; Spielmann et al. 1991, 1993, 1996). Historical data

for *in vitro* basal cytotoxicity testing using normal human keratinocytes (NHK) cells are also available through other publications (e.g., Gettings et al. 1996; Harbell et al. 1997; Sina et al. 1995; Willshaw et al. 1994).

NICEATM, in partnership with the European Center for the Validation of Alternative Methods (ECVAM), designed a multi-laboratory validation study to evaluate reduction or refinement that might result when using cytotoxicity data from the 3T3 and NHK NRU test methods as part of the weight-of-evidence to estimate starting doses for the Up-and-Down Procedure (UDP; OECD 2001a; EPA 2002a) and the Acute Toxic Class (ATC) method (OECD 2001d). The *Guidance Document* NRU protocols were the initial basis of the NICEATM/ECVAM study protocols. These protocols were derived from examination of the BALB/c 3T3 Cytotoxicity Test, INVITTOX Protocol No. 46 (available at the FRAME-sponsored INVITTOX database [<http://embryo.ib.amwaw.edu.pl/invittox/>]) and the Borenfreund and Puerner (1985) (3T3 cells) as well as Borenfreund and Puerner (1984) and (Heimann and Rice 1983) (NHK cells). See **Section 2** for a detailed description of the test method protocols.

### ***Test Method Protocol Components***

The test method protocol components for the *in vitro* NRU cytotoxicity test methods used in the NICEATM/ECVAM study are very similar for the 3T3 and the NHK cells. The following procedures are common to both cell types:

- preparation of reference substances and positive control
- cell culture environmental conditions
- determination of test substance solubility
- 96-well plate configuration for testing samples
- range finder and definitive testing (48-hour exposure to the reference substance)
- microscopic evaluation of cell cultures for toxicity
- measurement of NRU
- data analysis

The main differences in the test methods are:

- the conditions of propagation of the cells in culture
- the cell growth medium components
- the application of reference substances to the 96-well plate (i.e., different volumes of reference substance solution)

Three testing laboratories participated in testing 72 reference substances, in three phases:

- ECBC: The U.S. Army Edgewood Chemical Biological Center (Edgewood, MD)
- FAL: Fund for the Replacement of Animals in Medical Experiments (FRAME) Alternatives Laboratory (Nottingham, UK)
- IIVS (Gaithersburg, MD)

BioReliance Corporation (Rockville, MD) procured and distributed the coded reference substances and performed solubility tests prior to distribution to the cytotoxicity testing laboratories.

### ***Validation Substances***

Reference substances were selected to represent: (1) the complete range of *in vivo* acute oral toxicity (in terms of LD<sub>50</sub> values where LD<sub>50</sub> is median lethal dose); (2) the types of substances regulated by various regulatory authorities; and (3) those with human toxicity data and/or human exposure potential. To assure the complete range of toxicity was covered, the Globally Harmonized System of Classification and Labelling of Substances (UN 2005) was used to select 12 substances for each of the five acute oral toxicity categories and 12 unclassified substances. A discussion of characteristics and sources of the reference substances can be found in **Section 3** of the BRD. The set of selected reference substances had the following characteristics:

- 58 of the 72 substances were also included in the RC
- 27 (38%) of the substances had pharmaceutical uses, 15 (21%) had pesticide uses, 8 (11%) had solvent uses, and 5 (7%) had food additive uses. The



remaining substances were used for a variety of manufacturing and consumer products.

- 55 (76%) were organic compounds and 17 (24%) were inorganic compounds; commonly represented classes of organic compounds included heterocyclic compounds, carboxylic acids, and alcohols
- 22 (31%) substances were known or expected to have active metabolites
- many of the selected substances had multiple target organs/effects; including neurological, liver, kidney, and cardiovascular effects

### ***In Vivo* Rodent Toxicity Reference Data**

Because the *in vitro* NRU cytotoxicity test methods are intended to be used as adjuncts to *in vivo* acute oral systemic toxicity test methods using rats, rodent LD<sub>50</sub> values from acute oral systemic toxicity tests are the most appropriate reference data for the *in vitro* NRU IC<sub>50</sub> values (i.e., the concentration of the test substance that reduces cell viability by 50%). *In vivo* LD<sub>50</sub> reference data for the 72 reference substances were determined from the literature. Limiting the data to studies conducted under Good Laboratory Practice (GLP) guidelines (OECD 1998; EPA 2003a, 2003b; FDA 2003) was not possible since only 3% of the data records were from such studies. While mouse data were considered initially, eventually analyses were restricted to rat data. In total, 485 acute oral LD<sub>50</sub> values were identified for rats for the 72 reference substances. Reference LD<sub>50</sub> values for each substance were identified by excluding studies that employed the following materials and methods:

- feral rats
- rats < 4 weeks of age
- anesthetized rats
- test substance administered in food or capsule
- LD<sub>50</sub> reported as a range or inequality

*In vivo* reference values were determined, where multiple values existed, by calculating a geometric mean of the values. The reference LD<sub>50</sub> values for 20 of the 72 substances varied

enough from the initial LD<sub>50</sub> values, which came from the RC database and other summary sources, that the substances were reclassified into different GHS oral toxicity categories.

### ***Test Method Accuracy***

Although the 3T3 and NHK NRU test methods are not intended as replacements for acute systemic toxicity assays, the ability of these methods to correctly predict the reference LD<sub>50</sub> values was used to evaluate their accuracy<sup>3</sup>. The rationale for evaluating the accuracy of LD<sub>50</sub> predictions was that the animal savings produced by using these *in vitro* test methods to predict starting doses for acute systemic toxicity assays would be greatest when the starting dose is as close as possible to the LD<sub>50</sub>. An IC<sub>50</sub>-LD<sub>50</sub> regression model was used to derive the estimated LD<sub>50</sub> value using 3T3 or NHK NRU IC<sub>50</sub> values.

A number of different analyses were done in an attempt to improve the estimation of LD<sub>50</sub> by the regression. IC<sub>50</sub>-LD<sub>50</sub> regressions (millimole units) for each NRU test method and laboratory were developed using the IC<sub>50</sub> data and reference LD<sub>50</sub> for the reference substances in the NICEATM/ECVAM validation study. The regressions were not significantly different from a regression for the 58 RC substances (calculated using the RC IC<sub>50</sub> and LD<sub>50</sub> data) included among the 72 reference substances (F test; p = 0.929 for the 3T3 NRU regression and p = 0.144 for the NHK NRU regression).

Discordant substances (i.e., test substances that fit the RC millimole regression poorly) were evaluated. Since the 3T3 and NHK NRU regressions yielded results that were not different from the RC, the RC millimole regression was preferred for analysis of discordant substances since it is based on a larger chemical data set than that used in the NICEATM/ECVAM validation study. Discordant substances from the NICEATM/ECVAM study were analyzed to determine whether there were relationships between their outlier status and physical or chemical characteristics. The lack of fit to the RC millimole regression was correlated with chemical class, boiling point, molecular weight, and log K<sub>OW</sub>, but not with the insolubility of

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<sup>3</sup> Accuracy: the agreement between a test method result and an accepted reference value (ICCVAM 2003).

the reference substance in the 3T3 or NHK medium or to the fact that the test method systems had little to no metabolic capability. Since these test methods are based upon basal cytotoxicity, mechanism of toxicity was also considered as a characteristic to explain poor fit to the RC millimole regression. Of the 21 reference substances with specific mechanisms of toxicity that were not expected to be active in the 3T3 and NHK cell cultures, 13 (62%) were outliers (i.e., they fit the RC millimole regression poorly). These substances represented 13/30 (43%) of the outliers for the 3T3 NRU and 13/31 (42%) for the NHK NRU. Information on this analysis is presented in **Section 6.4**.

Additional regressions were developed to improve the RC millimole regression. Substances with *in vivo* LD<sub>50</sub> values based only on mouse test data were excluded. Substances with mechanisms of toxicity that were not expected to be active in the 3T3 and NHK cell cultures were excluded, leading to the RC rat-only regression excluding substances with specific mechanisms of toxicity. In addition, the RC rat-only data were converted to a weight basis for an additional regression analysis, the RC rat-only weight regression.

Accuracy of the *in vitro* NRU test methods (when used with each of the three IC<sub>50</sub>-LD<sub>50</sub> regressions) was characterized by determining the proportion of chemicals for which GHS acute oral toxicity categories were correctly predicted. However, this does not imply that the *in vitro* NRU tests are stand-alone methods that can be used for hazard classification. The accuracy for the prediction of toxicity for substances in the GHS acute oral toxicity categories for LD<sub>50</sub> > 2000 mg/kg was improved by removing substances with specific mechanisms of toxicity from the RC rat-only weight regression (compared with the RC millimole regression). It did not improve the accuracy of category prediction for substances with LD<sub>50</sub> < 50 mg/kg or for substances with 300 < LD<sub>50</sub> ≤ 2000 mg/kg; however, in the latter case, accuracy was already relatively high. The RC rat-only weight regression excluding substances with specific mechanisms of toxicity improved the overall accuracy for the 3T3 NRU test method from 26% (12/46 test substances) with the RC millimole regression to 46% (21/46 test substances). The RC rat-only weight regression excluding substances with specific mechanisms of toxicity improved the overall accuracy for the NHK NRU test method from 28% (13/47 test substances) for the RC millimole regression to 38%

(18/47 test substances). For each regression evaluated, there was a general trend to underpredict the toxicity of the most toxic chemicals and to overpredict the toxicity of the least toxic chemicals. A detailed discussion of the accuracy analyses is presented in **Section 6.3**.

### ***Test Method Reliability***

Intra- and inter-laboratory reproducibility of the 3T3 and NHK NRU IC<sub>50</sub> data were assessed using analysis of variance (ANOVA), coefficient of variation (CV) analysis, comparison of the laboratory-specific IC<sub>50</sub>-LD<sub>50</sub> regressions to one another (for each test method), and laboratory concordance for the GHS acute oral toxicity category predictions. Reproducibility is the consistency of individual test results obtained in a single laboratory (intralaboratory reproducibility) or in different laboratories (interlaboratory reproducibility) using the same protocol and test samples.

Although ANOVA results for the positive control, SLS, IC<sub>50</sub> for the 3T3 NRU test method indicated there were significant differences among laboratories ( $p = 0.006$ ), a graphical display of the data (see **Figure 7-1**) shows that laboratory means and standard deviations for each study phase overlap one another. Interlaboratory CV values, which ranged from 2% to 10% for the study phases, also indicated that the laboratories were similar. ANOVA results for the SLS IC<sub>50</sub> for the NHK NRU test method also showed significant differences between laboratories ( $p < 0.001$ ). A different cell culture method at FAL was responsible for SLS IC<sub>50</sub> differences among the laboratories in Phases Ia and Ib. After harmonization of culture methods with the other laboratories, the laboratory means and standard deviations were quite similar for Phases II and III (see **Figure 7-1**). Interlaboratory CV values for SLS in the NHK NRU test method ranged from 8% (Phase III) to 39% (Phase Ia). Very small slopes ( $< |0.001|$ ) for linear regression analyses of the SLS IC<sub>50</sub> over time (within each laboratory) for both *in vitro* NRU test methods indicated that the SLS IC<sub>50</sub> was stable over the 2.5 year duration of the study.

ANOVA results for the reference substances showed significant laboratory differences

for 26 substances for the 3T3 NRU test method and seven substances for the NHK NRU test method (see **Table 7-6**). An analysis to determine the relationship, if any, between substance attributes and interlaboratory CV indicated that physical form, solubility, and volatility had little effect on CV. CV seemed to be related, however, to chemical class, GHS acute toxicity category, IC<sub>50</sub>, and boiling point (see **Section 7.2.2**). Although the ANOVA results and the interlaboratory CV analysis (at least for the 3T3 NRU) seemed to indicate that interlaboratory reproducibility may be less than desired, the comparison of laboratory specific IC<sub>50</sub>-LD<sub>50</sub> regressions indicated that the laboratory regressions for both test methods were not significantly different from one another ( $p = 0.796$  for the 3T3 NRU and  $p = 0.985$  for the NHK NRU). In addition, the laboratory concordance for the prediction of GHS oral toxicity categories ranged from 78 - 85% for the 3T3 NRU and 84 - 91% for the NHK NRU (depending on the regression used). The similarity of the laboratories in LD<sub>50</sub> predictions (via regression) and GHS toxicity category predictions is considered most significant with respect to the reproducibility analyses since the NRU methods are proposed for use with the regressions in determining starting doses for acute oral toxicity tests.

### ***Animal Welfare Considerations: Reduction, Refinement, and Replacement***

For the NICEATM/ECVAM validation study, computer simulation models were used to simulate the UDP and ATC testing of the reference substances tested with the NRU basal cytotoxicity test methods. Reference substances that had only mouse reference LD<sub>50</sub> data or with known mechanisms of toxicity that were not expected to be active in the 3T3 and NHK cell cultures were not evaluated. The number of animals used for simulated testing and the number of animals that lived or died were determined for the default starting dose and for the NRU-determined starting dose (i.e., one default dose lower than the estimated LD<sub>50</sub>) with 2000 computer test simulations for each substance and starting dose. The computer simulations accounted for the accuracy of the NRU results with respect to the prediction of LD<sub>50</sub> values since the accuracy was conferred by the particular regression evaluated

Computer simulation modeling of UDP testing shows that, for the substances tested in this validation study, the prediction of starting doses using the NRU test methods resulted in the use of statistically fewer animals by an average of 1.00 - 1.16 animals (approximately 12%)

when using the RC rat-only weight regression excluding substances with specific mechanisms of toxicity depending upon NRU test method and dose-response slope (of 2 or 8.3). There were no animal savings for chemicals with  $50 < LD_{50} \leq 300$  mg/kg when test substances were grouped by GHS toxicity category since animal use was compared with animal used for the default starting dose of 175 mg/kg. However, statistically significant animal savings were as high as 1.75 - 2.22 (19.1 - 20.5%) animals for substances with  $2000 < LD_{50} \leq 5000$  mg/kg or  $LD_{50} > 5000$  mg/kg. Using the NRU test methods to estimate starting doses also resulted in approximately 0.1 to 0.2 fewer deaths for the simulated UDP testing compared to the default starting dose.

Computer simulation modeling of ATC testing showed that, for the substances tested in this validation study, the prediction of starting doses using the NRU test methods resulted in the use of 1.68 - 1.94 (15.4 - 21.1%) fewer (statistically) animals for the RC rat-only weight regression excluding substances with specific mechanisms of toxicity depending upon NRU test method and dose-response slope (of 2 or 8.3). There were no animal savings for substances with  $300 < LD_{50} \leq 2000$  mg/kg when test substances were grouped by GHS toxicity category since animal use was compared with animal use using the default starting dose of 300 mg/kg. Using the RC rat-only weight regression excluding substances with specific mechanisms of toxicity, the highest animal savings for both test methods were for substances with  $2000 < LD_{50} \leq 5000$  mg/kg (1.23 [11.0%] - 3.07 [25.8%] animals) and substances with  $LD_{50} > 5000$  mg/kg (3.79 [31.8%] - 4.38 [36.5%] animals). Using the NRU  $IC_{50}$  values to estimate starting doses for the ATC refined animal use by producing approximately 0.6 to 0.7 fewer animal deaths than when the default starting dose of 300 mg/kg was used.

### ***Practical Considerations***

Practical issues to consider for implementation of these cell culture test methods include the need for and availability of specialized equipment, training and expertise requirements, cost considerations, and time expenditure. Good Cell Culture Practice: ECVAM Good Cell Culture Practice Task Force Report 1 (Hartung et al. 2002) encourages the establishment of

practices and principles that will reduce uncertainty in the development and application of *in vitro* test methods.

All equipment and supplies are readily available. The NRU test methods are easily transferable to laboratories experienced with mammalian cell culture methods. Much of the training and expertise needed to perform the 3T3 and NHK NRU test methods are common to all mammalian cell culturists. Additional technical training would not be intensive since these test methods are similar in general performance to other *in vitro* mammalian cell culture assays. GLP training should be provided to technicians to ensure proper adherence to protocols and documentation procedures.

Prices for commercial testing for one substance are \$1120 to \$1850 for *in vitro* NRU cytotoxicity testing to determine the IC<sub>50</sub> (IIVS, personal communication). It is not clear if the price of an *in vivo* test would be reduced if it were preceded by an *in vitro* cytotoxicity test to set the starting dose. Thus, use of these test methods may not reduce the overall cost of the *in vivo* rat acute oral toxicity test and might increase the cost, but their use can reduce the number of animals needed for a study. Based on cost and technical procedures associated with culture maintenance, the 3T3 cells are less expensive to use and less difficult to maintain than the NHK cells.

### **Peer Review**

ICCVAM has considered the information in this BRD and developed draft recommendations regarding the current uses of these *in vitro* cytotoxicity test methods, and recommendations for future efforts that should be undertaken to advance the usefulness of *in vitro* methods for predicting *in vivo* acute oral toxicity. These draft recommendations are provided in a separate document. As part of the ICCVAM test method evaluation process, an independent international peer review panel will be convened to carry out an independent peer review of the 3T3 and NHK NRU test methods and to comment on the extent that the ICCVAM recommendations are supported by the information and data provided in the BRD. ICCVAM will consider the peer review panel report and public comments, and develop final test method recommendations that will be forwarded to U.S. Federal agencies for their

consideration, and where appropriate, incorporation into applicable test guidelines, regulations, and policies.

ICCVAM has also drafted test method performance standards for *in vitro* acute toxicity test methods as a separate document. These proposed standards used the NICEATM/ECVAM validation study results as performance criteria for the future use of *in vitro* test methods to determine starting doses for acute systemic toxicity testing. The test method performance standards may be revised if other methods with better predictability are adequately validated.



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**1.0 INTRODUCTION AND RATIONALE FOR THE USE OF *IN VITRO* NEUTRAL RED UPTAKE CYTOTOXICITY TEST METHODS TO PREDICT STARTING DOSES FOR *IN VIVO* ACUTE ORAL SYSTEMIC TOXICITY TESTING**

Poisoning is a more serious public health problem than is generally recognized. The Institute of Medicine estimates that more than 4 million poisoning episodes occur annually in the United States (Institute of Medicine 2004). In 2001, 30,800 deaths placed poisoning as the second leading cause of injury-related death behind automobile accidents (42,433 deaths) (Institute of Medicine 2004). The hazard potential for poisoning in humans is assessed by acute oral toxicity testing in rodents, which is a regulatory requirement for many substances and products. However, ethical and societal demands call for decreasing the numbers of animals used for such studies.

*In vitro* cytotoxicity methods have been evaluated as a means to reduce and refine<sup>1</sup> the use of animals in toxicity testing. In 1983, an international effort called the Multicentre Evaluation of *In Vitro* Cytotoxicity (MEIC) was initiated to evaluate the relationship of *in vitro* cytotoxicity to acute *in vivo* toxicity. Tests of 50 substances in 61 *in vitro* assays identified a battery of three human cell line assays that were correlated to human lethal blood concentrations. The Registry of Cytotoxicity (RC), a database that currently consists of *in vivo* acute toxicity data from rats and mice and *in vitro* cytotoxicity data from multiple cell lines for 347 substances, was published in 1998 (Halle 1998). A regression model constructed from these data was proposed by ZEBET, the German National Center for the Documentation and Evaluation of Alternative Methods to Animal Experiments, as a method to reduce animal use by identifying the most appropriate starting doses for acute oral systemic toxicity tests (Halle 1998; Spielmann et al. 1999). In October, 2000, these initiatives, a European Center for the Validation of Alternative Methods (ECVAM) testing strategy (Seibert et al. 1996), and other initiatives (ICCVAM 2001a [see Section 2.4, pg. 24])

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<sup>1</sup> A reduction alternative is a new or modified test method that reduces the number of animals required. A refinement alternative is a new or modified test method that refines procedures to lessen or eliminate pain or distress in animals or enhances animal well-being (ICCVAM 2003).

76 to use *in vitro* cytotoxicity test methods to reduce animal use in acute toxicity testing were  
77 evaluated by the International Workshop on *In Vitro* Methods for Assessing Acute Systemic  
78 Toxicity (hereafter referred to as “Workshop 2000”; ICCVAM 2001a). This workshop was  
79 organized by the Interagency Coordinating Committee on the Validation of Alternative  
80 Methods (ICCVAM) and The National Toxicology Program (NTP) Interagency Center for  
81 the Evaluation of Alternative Toxicological Methods (NICEATM).

82  
83 ICCVAM recommended (ICCVAM 2001a) further evaluation of the use of *in vitro*  
84 cytotoxicity data as one of the factors used to estimate starting doses for *in vivo* acute  
85 lethality studies based on preliminary information that this approach could reduce the number  
86 of animals used in *in vivo* studies (i.e., reduction), minimize the number of animals that  
87 receive lethal doses (i.e., refinement), and avoid underestimating hazard. ICCVAM  
88 concurred with the Workshop recommendation that near-term validation studies should focus  
89 on two standard basal cytotoxicity assays: one using a human cell system and one using a  
90 rodent cell system. Since the murine BALB/c 3T3 cytotoxicity assay had been evaluated for  
91 only a limited number of chemical classes, there is merit in determining its usefulness with a  
92 broader array of chemical classes. A background of historical data for *in vitro* cytotoxicity  
93 testing using 3T3 cells is available through other publications (e.g., Balls et al. 1995;  
94 Brantom et al. 1997; Gettings et al. 1991, 1994a, 1994b; Spielmann et al. 1991, 1993, 1996).  
95 Human cell lines should also be considered since one of the aims of toxicity testing is to  
96 make predictions of potential toxicity in humans (ICCVAM 2001a – *ICCVAM*  
97 *Recommendations*). Historical data for *in vitro* cytotoxicity testing using normal human  
98 keratinocyte (NHK) cells is also available through other publications (e.g., Gettings et al.  
99 1996; Harbell et al. 1997; Sina et al. 1995; Willshaw et al. 1994).

100  
101 NICEATM, in partnership with ECVAM, designed a multi-laboratory validation study to  
102 evaluate animal reduction when using two mammalian cell types for *in vitro* basal  
103 cytotoxicity test methods with a neutral red uptake (NRU) cell viability endpoint to predict  
104 starting doses (i.e., estimated rat LD<sub>50</sub> values where LD<sub>50</sub> is median lethal dose) for acute oral  
105 systemic toxicity test methods. The objectives for the NICEATM/ECVAM validation study  
106 were to:

- further standardize and optimize two *in vitro* NRU cytotoxicity protocols using mouse fibroblast (BALB/c) 3T3 cells and normal human epidermal keratinocytes (NHK) in order to maximize intra- and inter-laboratory reproducibility
- refine the prediction model drawn from the ZEBET approach
- assess the accuracy of the two standardized *in vitro* basal cytotoxicity test methods for estimating rodent oral LD<sub>50</sub> values across the five Globally Harmonized System of Classification and Labelling of Chemicals (GHS; United Nations [UN] 2005) categories of acute oral toxicity as well as unclassified toxicities and estimating human lethal serum concentrations
- estimate the reduction and refinement in animal use achievable from using *in vitro* basal cytotoxicity assays as one of the factors of the weight-of-evidence to identify starting doses for specific *in vivo* acute toxicity tests
- generate high quality *in vivo* lethality and *in vitro* cytotoxicity databases that can be used to support the investigation of other *in vitro* test methods necessary to improve the prediction of acute systemic toxicity

**Section 1** of this background review document (BRD) summarizes the background information on the use of *in vitro* cytotoxicity test methods for predicting starting doses for acute systemic toxicity assays. It includes an overview of the correlation between *in vitro* cytotoxicity and acute lethality, the regulatory requirements for acute systemic toxicity testing, the purpose of using *in vitro* NRU assays to predict starting doses for *in vivo* acute oral systemic toxicity assays, the scientific basis of the approach, and the intended uses and applicability of this approach. **Section 2** describes the protocols used to evaluate the NRU assays using 3T3 and NHK cells. **Section 3** describes the selection of the reference substances tested in the current validation study. **Section 4** describes the derivation of reference *in vivo* rat and mouse LD<sub>50</sub> values for the substances used to assess the performance of the *in vitro* NRU cytotoxicity test methods (hereafter referred to as “[3T3 and/or NHK] NRU test methods”). **Section 5** provides the 3T3 and NHK NRU data obtained during the validation study. **Section 6** refines the ZEBET approach and provides an assessment of the accuracy of the NHK and 3T3 assays for predicting acute systemic

138 toxicity. **Section 7** describes the assessment of the reproducibility of the assays. **Section 8**  
139 summarizes the quality of the 3T3 and NHK NRU data. **Section 9** summarizes relevant data  
140 from other studies using *in vitro* cytotoxicity test methods. **Section 10** discusses computer  
141 simulation modeling methods and results from the use of the 3T3 and NHK NRU test  
142 methods to reduce and refine animal use in acute systemic toxicity assays. **Section 11**  
143 discusses resource needs (e.g., equipment, training, time, cost) to implement these *in vitro*  
144 test methods. **Section 12** provides the references and **Section 13** provides a glossary of terms  
145 used in this BRD. The appendices provide supporting information for the aforementioned  
146 sections.

## 148 **1.1 Background and Rationale for the Use of *In Vitro* Cytotoxicity Assays to** 149 **Predict Starting Doses for *In Vivo* Acute Oral Systemic Toxicity Tests**

151 Workshop 2000 was jointly sponsored by the U.S. National Institute of Environmental  
152 Health Sciences (NIEHS), the NTP, and the U.S. Environmental Protection Agency (EPA).  
153 During this workshop, participants reviewed the status of several major international *in vitro*  
154 initiatives directed toward using *in vitro* test methods to reduce the use of laboratory animals  
155 for acute toxicity testing (ICCVAM 2001a). **Sections 1.1.1 to 1.1.3** review three major  
156 initiatives evaluated by Workshop 2000 participants. **Section 1.1.4** provides information on  
157 the development of the NICEATM/ECVAM *In Vitro* NRU Cytotoxicity Validation Study.

### 159 **1.1.1 The MEIC Program**

160 The Scandinavian Society for Cell Toxicology established the MEIC program in 1983 to  
161 investigate the relevance of *in vitro* test results for predicting the acute toxicity of substances  
162 in humans (Bondesson et al. 1989). The program was an open study that invited interested  
163 laboratories worldwide to participate in testing 50 reference substances in their particular *in*  
164 *vitro* cytotoxicity assays. Although participating laboratories were requested to buy high  
165 purity chemicals, no effort was made to assure that all laboratories tested substances of the  
166 same purity or even purchased them from the same supplier (Clemedson et al. 1996a).  
167 Minimal methodological directives were provided to maximize protocol diversity among the  
168 96 participating laboratories.

The reference substances were selected to represent different classes of chemicals with good data on acute toxicity (i.e., lethal doses, kinetics, and blood/serum concentrations [LC] in humans and the oral dose producing lethality in 50% of the animals [oral LD<sub>50</sub> values] in rats and mice) to serve as reference values for the *in vitro* tests (Bondesson et al. 1989). The MEIC management team collected human data from clinical and forensic toxicology handbooks and case reports from human poisonings (Ekwall et al. 1998a). The data were presented and analyzed in a series of 50 MEIC Monographs. Rat and mouse oral LD<sub>50</sub> data were collected from the Registry of Toxic Effects for Chemical Substances (RTECS®) from the U.S. National Institute for Occupational Safety and Health ([NIOSH]; now licensed to MDL Information Systems, Inc.).

The 50 reference substances were tested in 61 different *in vitro* assays (Ekwall et al. 1998b). The measurement of interest was the concentration producing 50% inhibition of the endpoint measured (i.e., IC<sub>50</sub>, the concentration that produces 50% inhibition of the endpoint measured). Of the 20 assays that used human-derived cells, 18 used cell lines and two used primary cell cultures. Twenty-one assays used cells of animal origin (12 cell lines and nine primary cell cultures). Eighteen assays were ecotoxicological tests and two were cell-free test systems. The majority of the assays measured cell viability and/or cell growth.

The predictability of *in vivo* acute toxicity from the *in vitro* IC<sub>50</sub> data was assessed against human LC values compiled from three different data sets: clinically measured acute lethal serum concentrations, acute lethal blood concentrations measured post-mortem, and peak LC values derived from approximate LC<sub>50</sub> curves over time after exposure (Ekwall et al. 2000). A partial least squares (PLS) analysis indicated that the 61 assays predicted the three sets of lethal blood concentrations well ( $R^2 = 0.77, 0.76$  and  $0.83$ ,  $Q^2 = 0.74, 0.72$ , and  $0.81$ , respectively, where  $R^2$  is the determination coefficient and  $Q^2$  is the predicted variance according to cross-validation in the PLS model used). The prediction of human lethal doses by rat and mouse oral LD<sub>50</sub> values with a two component PLS model was less accurate ( $R^2 = 0.65$ ,  $Q^2 = 0.64$ ) than the *in vitro* predictions of lethal blood concentrations.

The exposure duration for the *in vitro* assays was most often 24 hours, but ranged from 5 minutes to 6 weeks (Clemedson et al. 1996). Results suggested that basal (general) cytotoxicity can be assessed using a variety of mammalian cell lines and almost any growth/viability endpoint.

The MEIC analysis showed that the most predictive *in vitro* assays generally used human cell lines (Ekwall et al. 1998b). The MEIC study yielded a battery of *in vitro* assays with good performance for predicting acute lethality in humans (Ekwall et al. 2000). The MEIC team concluded that improvements were necessary for *in vitro* tests to be used as complete replacements for acute animal tests. To adjust for toxicity produced by mechanisms other than basal cytotoxicity, the evaluation-guided development of new *in vitro* tests (EDIT) was proposed to address targeted development of *in vitro* methods for other endpoints including biokinetics (gut absorption, distribution, clearance), biotransformation, and target organ toxicity (Clemedson et al. 2002).

#### 1.1.2 The RC

The RC is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS® and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for substances with known molecular weights (Halle 1998). The main purpose for compiling the RC was to evaluate, with a large amount of data from substances with a wide range of systemic oral toxicities, whether basal cytotoxicity (averaged over various cells, cell lines, and/or toxicity endpoints) is a sufficiently accurate predictor of acute systemic toxicity. The RC currently contains data for 347 substances (Halle 1998) and efforts are underway to increase the number of substances to 500 (ICCVAM 2001a). To date, mixtures of chemicals have not been evaluated.

The RC includes published data for substances that met the following criteria for cytotoxicity data (Halle 1998):

- at least two different IC<sub>50</sub> values were available, either from different cell types, different cell lines, or different cytotoxicity endpoints
- mammalian cells, with the exception of hepatocytes were used



- substance exposure duration was at least 16 hours, with no upper limit

The following cytotoxicity endpoints were accepted:

- cell proliferation: cell number, cell protein, DNA content, DNA synthesis, <sup>3</sup>H-thymidine intake, colony formation
- cell viability and metabolic indicators: metabolic inhibition test (MIT-24), mitochondrial reduction of tetrazolium salts into an insoluble (3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyl tetrazolium bromide [MTT]) or soluble (2,3-bis(2-methoxy-4-nitro-5-sulfophenyl)-2H-tetrazolium-5-carboxanilide [XTT]) dye
- cell viability/membrane indicators: NRU, Trypan blue exclusion, cell attachment, cell detachment
- differentiation indicators, such as functional and morphological indicators within cell clusters, and/or intracellular morphology

IC<sub>50</sub> values for 347 substances were obtained from 157 original publications (Halle 1998). The 1,912 IC<sub>50</sub> values, two to 32 per substance, were averaged using geometric means to produce one IC<sub>50x</sub> value for each substance.

For the RC *in vivo* data, LD<sub>50</sub> values published in RTECS<sup>®</sup> were used. For the first 117 substances, designated as the training data set (RC-I), LD<sub>50</sub> values were not revised when subsequent issues of RTECS<sup>®</sup> reported different LD<sub>50</sub> values. For the most recent 230 substances, designated as the verification set (RC-II), the LD<sub>50</sub> values were taken only from the 1983/84 RTECS<sup>®</sup> publication. Whenever obtainable, oral LD<sub>50</sub> data from rats were used (282 values). If rat data were unavailable, LD<sub>50</sub> data from mice were used (65 values). Combining rat and mouse data in the regression was deemed to be justified when separate regressions for the mouse and rat LD<sub>50</sub> data against the IC<sub>50x</sub><sup>2</sup> data did not result in significant differences between the slopes and intercepts of the rat and mouse regressions (Halle 1998).

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<sup>2</sup> IC<sub>50x</sub> is the geometric mean of multiple IC<sub>50</sub> values collected for each substance in the RC database.

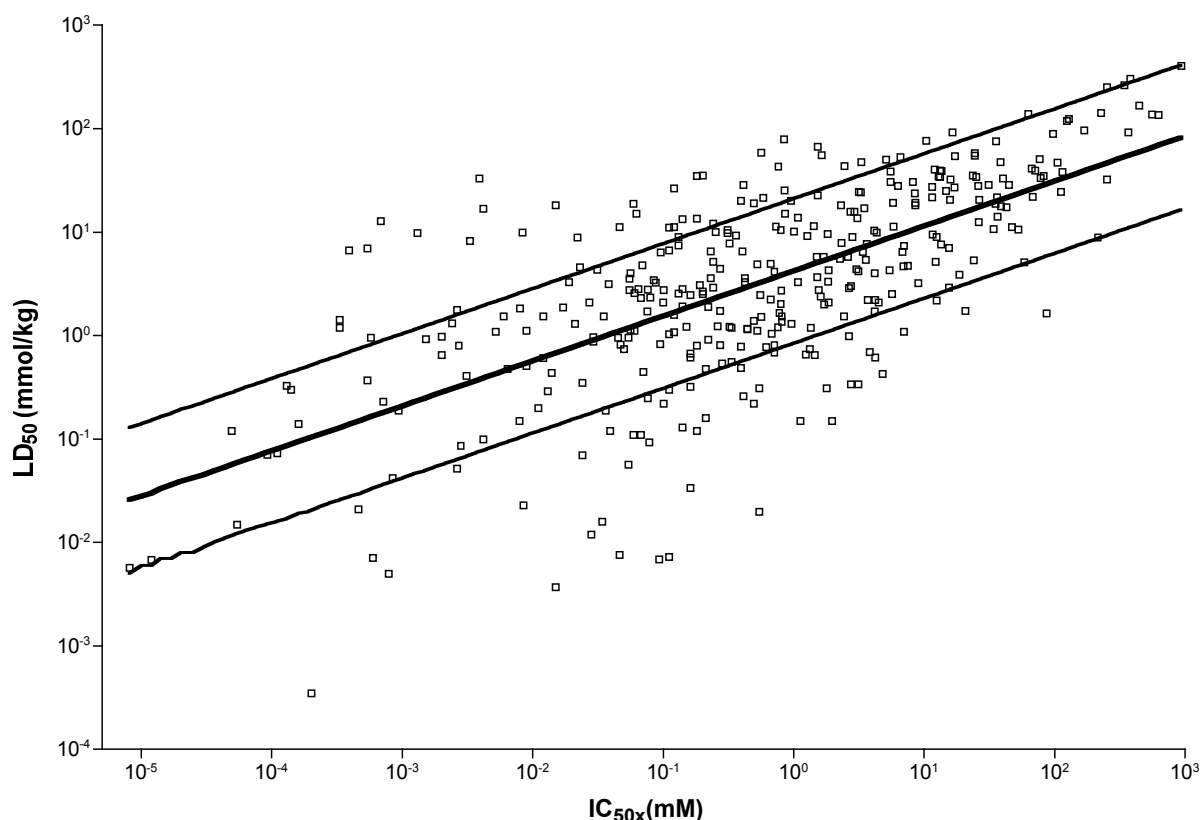
To obtain a model for the prediction of LD<sub>50</sub> values from IC<sub>50</sub> values, Halle (1998) calculated a linear regression from pairs of the log-transformed IC<sub>50x</sub> values (in mM) and log transformed rodent oral LD<sub>50</sub> values (in mmol/kg) (see **Figure 1-1**). The regression, referred to here as the “RC millimole regression,” has the following formula:

$$\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \times \log \text{IC}_{50x} (\text{mM}) + 0.625$$

Presumably, the substance units were expressed in moles because moles are the units that produce biological activity and, hence, are expected to produce the best fitting regression. All of the substance data were obtained for single chemicals; chemical mixtures were not included in the database and therefore were not available for determining the regression formula.

To identify an acceptability range for practical use and research purposes, the acceptable prediction interval for the LD<sub>50</sub> was empirically defined as approximately one-half order of magnitude on either side of the best-fit linear regression (i.e.,  $\pm \log 5$ , or  $\pm 0.699$ ) (Halle 1998). This interval was based on eight linear regressions calculated for *in vitro* cytotoxicity data, using various endpoints and mammalian cells, and *in vivo* rat, mouse, or rat and mouse LD<sub>50</sub> data from five publications. It approximates the predicted LD<sub>50</sub> range for the eight regressions across about eight orders of magnitude of IC<sub>50</sub> values. Seventy-four percent of the RC substances fall within the prediction interval.

**Figure 1-1 RC Millimole Regression Between *In Vitro* Cytotoxicity (IC<sub>50x</sub>) and Rat and Mouse Acute Oral LD<sub>50</sub> Values for 347 Chemicals**



The heavy line shows the fit of the data to a linear regression model,  $\log(LD_{50}) = 0.435 \times \log(IC_{50x}) + 0.625$ ;  $r=0.67$ . IC<sub>50x</sub> values are the geometric means of multiple endpoints and cell types. The thinner lines show the empirical prediction interval ( $\pm \log 5$ , or  $\pm 0.699$ ) that is based on the anticipated precision for the prediction of LD<sub>50</sub> values from cytotoxicity data (Halle 1998).

### 1.1.3 The ZEBET Initiative to Reduce Animal Use

The concept that the predicted LD<sub>50</sub> value could be used as a starting dose for acute oral toxicity testing to reduce the number of animals was first discussed at an ECVAM workshop (Seibert et al. 1996) as it related to the, then new, sequential dosing methods such as the Acute Toxic Class method (ATC; OECD draft TG 423 [ICCVAM 2001a]) and the Up-and-Down Procedure (UDP; OECD draft TG 425 [ICCVAM 2001a]). In these tests, for which the OECD guidelines have now been finalized, the number of animals needed depends upon the choice of the starting dose, since the number of consecutive dosing steps (and thus the number of animals used) is reduced as the starting dose more closely approximates the true

toxicity class (ATC or Fixed Dose Procedure [FDP]), or the true LD<sub>50</sub> (UDP). The ZEBET approach involves using an IC<sub>50</sub> value from an *in vitro* basal cytotoxicity test to predict an LD<sub>50</sub> close to the true LD<sub>50</sub>. The IC<sub>50</sub> is used in the RC millimole regression to predict an LD<sub>50</sub> value for use as a starting dose for the ATC or UDP (Spielmann et al. 1999). The use of *in vitro* cytotoxicity assays to predict a starting dose equivalent to the LD<sub>50</sub> may reduce animal use in the UDP by 25-40%, depending upon the slope of the curve and the stopping rule applied (Spielmann et al. 1999; ICCVAM 2001a).

#### 1.1.4 The NICEATM/ECVAM In Vitro NRU Cytotoxicity Validation Study

Workshop 2000 participants concluded that none of the *in vitro* models reviewed had been formally evaluated for reliability and relevance, and their usefulness and limitations for generating information for acute toxicity testing had not been assessed. However, the approach proposed by ZEBET (Halle 1998; Spielmann et al. 1999) was recommended for rapid adoption so that data could be generated to establish its usefulness with a large number of substances (ICCVAM 2001a). To assist in the adoption and implementation of the ZEBET approach, several workshop participants wrote *Guidance Document on Using In Vitro Data to Estimate In Vivo Starting Doses for Acute Toxicity* (hereafter referred to as *Guidance Document*; ICCVAM 2001b).

The *Guidance Document* recommended testing 10 to 20 reference substances of high purity from the RC in a candidate *in vitro* basal cytotoxicity assay to be used for predicting starting doses for acute oral lethality tests (ICCVAM 2001b). The substances were to cover a wide range of toxicity and fit the RC prediction model (i.e., the linear regression line) as closely as possible. The assays recommended and provided as examples are NRU assays using 3T3 and NHK cells. The IC<sub>50</sub> results for the selected substances would be used to calculate a new regression line with the LD<sub>50</sub> values used by the RC. If the resulting regression were parallel to the RC millimole regression and within the  $\pm \log 5$  (i.e.,  $\pm 0.699$ ) prediction interval for the RC, the *Guidance Document* recommended using the cytotoxicity assay to predict starting doses for LD<sub>50</sub> assays. If the regression from the assay did not meet these criteria, then the *Guidance Document* advised either (a) adjusting the slope or (b) using the NRU protocols offered in the *Guidance Document* (considered the most efficient approach).

To further characterize the usefulness of the 3T3 and NHK NRU test methods as predictors of starting doses for acute oral systemic toxicity assays, NICEATM and ECVAM designed an independent<sup>3</sup> multi-laboratory validation study to evaluate the performance of these *in vitro* test methods. The inclusion of human cells in the NICEATM/ECVAM validation study implements a Workshop 2000 recommendation to evaluate whether cytotoxicity in human or rodent cells best predicts human acute toxicity. ECVAM's development of a prediction model for human acute toxicity using data collected in the NICEATM/ECVAM validation study will be addressed elsewhere.

### *Study Design*

The planning phases of the NICEATM/ECVAM validation study included the selection of reference substances for testing, which is described in **Section 3**, and the identification of reference LD<sub>50</sub> values for the reference substances, which is described in **Section 4**. The NRU testing proceeded in several phases (See **Figure 1-2**) so that the Study Management Team (SMT) could evaluate the reproducibility of results after each phase and refine the protocols, if necessary, before proceeding to the next phase. The NRU data collected during the laboratory phase were used to evaluate, and in some cases, develop, linear regression formulas for the prediction of LD<sub>50</sub> values by IC<sub>50</sub> values (see **Section 6**). Computer simulation modeling of acute oral toxicity test outcomes was then performed to determine animal savings using the NRU-predicted starting doses compared with the default starting dose (see **Section 10**). Study management and study participant information is provided in **Appendix A**.

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<sup>3</sup> "Independent" is used here to indicate that neither NICEATM nor ECVAM neither developed nor had monetary interest in the test methods.

**Figure 1-2 NICEATM/ECVAM Validation Study Phases****Phase Ia: Laboratory Evaluation**

Development of a positive control database for each laboratory

- Perform at least 10 replicate NRU tests of the positive control substance (sodium laurel sulfate [SLS]) with each cell type.
- Calculate mean  $IC_{50} \pm 2$  SD for each cell type for each lab.
- Establish acceptance criteria for positive control performance in future assays.

**Phase Ib: Laboratory Evaluation**

Limited substance testing to demonstrate the reliability of the protocol

- Each laboratory tests the same three coded substances of varying toxicities three times with each cell type.
- Refine protocols and repeat, if necessary, until acceptable intra/interlaboratory reproducibility is achieved.

**Phase II: Laboratory Qualification**

Evaluation of protocol refinements

- Each laboratory tests nine coded substances covering the range of GHS toxicity categories, with three replicate tests/substance for each test method.
- Assure that corrective actions taken in Phase I have achieved the desired results.
- Further refine protocols and re-test, if necessary, to achieve acceptable reliability.
- Finalize protocols for Phase III.

**Phase III: Laboratory Testing Phase**

Test of optimized protocols

- Each laboratory tests 60 coded substances three times using the final protocol for each test method.

## 1.2 Regulatory Rationale and Applicability for the Use of *In Vitro* Cytotoxicity Test Methods to Predict Starting Doses for Acute Oral Systemic Toxicity Testing

### 1.2.1 Current Regulatory Testing Requirements for Acute Systemic Toxicity

The major regulatory requirement for acute systemic toxicity testing is for the hazard classification and labeling of products, which is intended to protect handlers and consumers from toxic hazards. The LD<sub>50</sub> results from acute systemic toxicity tests are used to place substances in various toxicity categories that, in turn, invoke the associated hazard phrases to be used on product labels. **Table 1-1** shows the current U.S. legislation requiring the use of acute systemic toxicity testing for product labeling and the substances regulated. **Table 1-2** shows the statutory protocol requirements and classification systems used by each U.S. regulatory agency. Also included is an international guideline for labeling, the Harmonized Integrated Classification System for Human Health and Environmental Hazards of Chemical Substances and Mixtures, which provides guidance to regulatory agencies on the use of the GHS (UN 2005) as a method for an internationally comprehensible system for hazard communication (OECD 2001b).

**Table 1-1 Summary of Current U.S. Legislation for Using Acute Systemic Toxicity Data for Product Labeling**

Legislation (Year of Initial Enactment)	U.S. Regulatory Agency	Substance
Federal Insecticide, Fungicide and Rodenticide Act (1947)	EPA	Pesticides
Federal Hazardous Substances Act (1964)	CPSC	Household products
Occupational Safety and Health Act (1970)	OSHA	Occupational materials
Federal Hazardous Material Transportation Act (1975)	DOT	Transported substances

Abbreviations: EPA = U.S. Environmental Protection Agency; CPSC = U.S. Consumer Product Safety Commission; OSHA = U.S. Occupational Safety and Health Administration; DOT = U.S. Department of Transportation.

Note: The U.S. Food and Drug Administration (FDA) does not require data for acute lethality testing, and in fact, discourages the use of animals for such testing (FDA 1993).

**Table 1-2 Regulatory Classification Systems for Acute Oral Toxicity**

Regulatory Agency (Authorizing Act)	Animals	Endpoint	Classification
EPA (Federal Insecticide, Fungicide and Rodenticide Act)	Use current EPA or OECD protocol	Death <sup>1</sup>	I - $LD_{50} \leq 50$ mg/kg II - $50 < LD_{50} \leq 500$ mg/kg III - $500 < LD_{50} \leq 5000$ mg/kg IV - $LD_{50} > 5000$ mg/kg
CPSC (Federal Hazardous Substances Act)	White rats, 200-300 g	Death <sup>1</sup> within 14 days for $\geq$ half of a group of $\geq 10$ animals	Highly toxic - $LD_{50} \leq 50$ mg/kg Toxic - $50 \text{ mg/kg} < LD_{50} < 5 \text{ g/kg}$
OSHA (Occupational Safety and Health Act)	Albino rats, 200-300 g	Death <sup>1</sup> , duration not specified.	Highly toxic - $LD_{50} \leq 50$ mg/kg Toxic - $50 < LD_{50} < 500$ mg/kg
DOT (Federal Hazardous Material Transportation Act)	Male and female young adult albino rats	Death <sup>1</sup> within 14 days of half the animals tested. Number of animals tested must be sufficient for statistically valid results.	Packing Group 1 - $LD_{50} \leq 5$ mg/kg Packing Group II - $5 < LD_{50} \leq 50$ mg/kg Packing Group III - $LD_{50} < 500$ mg/kg (liquid) $LD_{50} < 200$ mg/kg (solid)
OECD Guidance for Use of GHS (2001a)	Protocol not specified	Protocol not specified	I - $LD_{50} \leq 5$ mg/kg II - $5 < LD_{50} \leq 50$ mg/kg III - $50 < LD_{50} \leq 300$ mg/kg IV - $300 < LD_{50} \leq 2000$ mg/kg V - $2000 < LD_{50} \leq 5000$ mg/kg Unclassified - $LD_{50} > 5000$ mg/kg

<sup>1</sup>Guidance Document on the Recognition, Assessment and Use of Clinical Signs as Humane Endpoints for Experimental Animals Used in Safety Evaluation calls for humane killing of moribund animals (OECD 2000). Moribund animals that are humanely euthanized are accepted as deaths.

Abbreviations: EPA = U.S. Environmental Protection Agency; CPSC = U.S. Consumer Product Safety Commission; OECD = Organisation for Economic Co-operation and Development; OSHA = U.S. Occupational Safety and Health Administration; DOT = U.S. Department of Transportation; GHS = Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005)



In addition to classification and labeling, acute systemic toxicity test results may be used for:

- establishing dosing levels for repeated dose toxicity studies
- generating information on the specific organs affected
- providing information related to the mode of toxic action
- aiding in the diagnosis and treatment of toxic reactions
- providing information for comparison of toxicity and dose response among substances in a specific chemical or product class
- aiding in the standardization of biological products
- aiding in judging the consequences of single, high accidental exposures in the workplace, home, or from accidental release
- serving as a standard for evaluating alternatives to animal tests

#### *Test Methods for Assessing Acute Systemic Toxicity*

The current internationally recognized test methods for acute systemic toxicity testing are the FDP (OECD 2001c), the ATC method (OECD 2001d), and UDP (OECD 2001a; EPA 2002a) (see **Appendix M** for test method guidelines). Information on signs of acute toxicity and target organs can be obtained using any of the three test methods. All three methods are sequential tests in which the outcome of testing one or more animals at the first dose is used to determine the second dose that should be tested. The FDP differs from the UDP and ATC in that it involves testing more animals per dose and the primary endpoint of interest is evident toxicity<sup>4</sup> rather than lethality. Both the FDP and the ATC method provide a range for the LD<sub>50</sub> for classification purposes. The UDP generally provides a point estimate of the LD<sub>50</sub> with a confidence interval (EPA 2002a).

Each of the test method guidelines include a limit test in which up to five (UPD and FDP) or six (ATC) animals are tested at the limit, or upper bound, dose (OECD 2001a,c,d; EPA 2002a). The limit test can be performed using 2000 or 5000 mg/kg.

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<sup>4</sup> *Evident toxicity* is a general term describing clear signs of toxicity following administration of test substance, such that an increase to the next highest fixed dose would result in the development of severe toxic signs and probably mortality (ICCVAM 2000).

### 1.2.2 Intended Regulatory Uses for the *In Vitro* Cytotoxicity Test Methods

*In vitro* cytotoxicity test methods are not recommended for the replacement of acute oral toxicity tests in animals. Rather, such test methods are intended to serve as adjuncts for *in vivo* acute systemic toxicity test methods. To select a starting dose for a test substance, the current test guidelines for acute oral systemic toxicity recommend using information on structurally-related substances and the results of any other toxicity tests (EPA 2002b), including *in vitro* cytotoxicity results (OECD 2001a, c, d; EPA 2002a). The 3T3 and NHK NRU test methods are intended to be used as part of the weight-of-evidence approach to select starting doses for the UDP and ATC assays in order to reduce and refine the use of animals for *in vivo* acute toxicity testing. The reduction of animals achievable with the use of basal cytotoxicity as an adjunct to the UDP or ATC is provided in **Section 10**. Since the estimation of the true LD<sub>50</sub> is irrelevant to setting doses for measuring evident toxicity, the FDP will not be considered further in this document.

**Section 10** presents analyses that characterize the extent of animal reduction and refinement that may occur by using the NRU test methods to estimate the starting doses for the UDP and the ATC method. Animal use and animal deaths for UDP and ATC testing is determined using computer simulation techniques rather than by animal testing. The simulations of UDP and ATC testing determine the number of animals used when using the default starting dose and when using a starting dose determined from the NRU test methods. The number of animals used with the NRU-determined starting dose is compared with the number of animals used with the default starting dose to determine the reduction in animal use with the NRU-determined starting dose. To characterize the extent of refinement produced by using the NRU-determined starting dose, the number of animals that die with the NRU-determined starting dose is compared with the number of animals that die when using the default starting dose.

### 1.2.3 Similarities and Differences in the Endpoints of the *In Vitro* Cytotoxicity Test Methods and *In Vivo* Acute Oral Toxicity Test Methods

The endpoint measured in the *in vitro* NRU cytotoxicity test methods is cell death (neutral red [NR] is taken up only by live cells) and the major endpoint of interest is the concentration

at 50% inhibition of NRU (i.e., the  $IC_{50}$ ). The endpoint measured in acute systemic toxicity assays is usually animal death. Cell death and animal death may be similar since animals are comprised of organ systems consisting of tissues, which are comprised of cells. All cells, regardless of whether they are in animals or *in vitro* cell cultures, have similar cellular mechanisms of energy production and utilization and maintenance of cell membrane integrity.

Animal death and death of cells in culture due to toxicity are similar in that both involve some type of cellular injury. For the animal, the cellular injury produces tissue and organ injury to the most sensitive target organ, which may then cause the death of the whole organism. Organ system failure can be due either to the death of cells in the affected organ or to the loss of function of the surviving cells in the organ, which results in cell death or loss of function in other organs (Gennari et al. 2004). Death of an animal is produced by major organ system failure. Ultimately the cardiovascular and respiratory systems fail. Respiratory depression may be due to depression of the central nervous system (CNS) rather than a direct assault on the respiratory system. Other major organ system failures, such as liver and kidney failure, gastrointestinal corrosion, and bone marrow depression, also produce death. Cell death in a culture system involves the death of a single cell type. Cell death and animal death may be produced by the same mechanisms, such as disruption of membrane structure or function, inhibition of mitochondrial function, disturbance of protein turnover, disruption of energy production, etc. (Gennari et al. 2004).

Animal and cell culture systems are different with respect to how a substance or toxin is delivered to the cell and how it is distributed, metabolized, and excreted. After oral administration, animals must absorb the toxin from the gastrointestinal tract, which involves the passage of membranes. The toxin may or may not be heavily bound to serum proteins; this would reduce the availability of the toxin to the target organ. The toxin may then be metabolized during and/or after distribution to the target organs and then the toxin or its metabolites are excreted. In a cell culture system, the only membranes that must be passed are those of the target cell and cellular organelles. No absorption and distribution by other cellular systems is required. Cell culture systems may or may not include serum proteins,

which could reduce the availability of toxin to act as its target site. The 3T3 cell culture system includes serum while the NHK cell culture system does not. The 3T3 and NHK cell culture systems have little to no capacity to metabolize xenobiotic compounds. Excretion from the cell culture milieu cannot occur since cell culture systems have no excretory system. The cultured cells are exposed to substances for the entire duration of exposure in the test system.

Animal and cell culture systems may also be different with respect to the target on which a toxin acts. If a toxin acts in a specialized organ system in a whole animal, it may not produce a toxic effect by the same mechanism in cultured cells that are derived from tissue different from the target organ. For example, a neurotoxin that acts by a neuroreceptor-mediated pathway in animals, would be expected to produce toxicity by a different mechanism in 3T3 or NHK cells, which are derived from fibroblasts, and skin cells, respectively. Even if a neurotoxin were applied to neuronal cells in culture, the cultured cells may not respond in the same way as neuronal cells in a whole animal. Cultured cells may not retain the same functionality as cells *in vivo*.

#### 1.2.4 Use of *In Vitro* Cytotoxicity Test Methods in the Overall Strategy of Hazard Assessment

In the overall strategy of hazard or safety assessment, the intended regulatory use of *in vitro* test methods is to reduce and refine the use of animals in current acute systemic toxicity assays (i.e., serve as adjuncts to these test methods). *In vitro* cytotoxicity test methods are not intended as replacements for the *in vivo* tests. For current OECD acute systemic toxicity assays (the ATC or UDP), that use sequential dosing methods, the number of animals used depends on the choice of starting dose since the number of dosing steps (and animals) is reduced if the starting dose is close to the true toxicity class (ATC) or to the true LD<sub>50</sub> (UDP) (Spielmann et al. 1999; ICCVAM 2001b).

As noted earlier, Spielmann et al. (1999) and the *Guidance Document* (ICVAM 2001b) suggest that the RC millimole regression be used with *in vitro* cytotoxicity data to predict starting doses for the ATC and UDP. The approach can be applied to substances with purity

appreciably lower than 100% as long as molecular weight and purity are known. Therefore, this approach is not applicable to mixtures such as product formulations or unknown substance samples.

Thus, in addition to evaluating the reduction of animal use associated with the ATC and UDP when the current RC millimole regression (in millimolar units) is used to predict the starting dose, this study also evaluated the reduction in animal use associated with regressions based on weight units.

### 1.3 Scientific Basis for the *In Vitro* NRU Test Methods

Cytotoxicity has been defined as the adverse effects resulting from interference with structures and/or processes essential for cell survival, proliferation, and/or function (Ekwall 1983). Ekwall (1983) described the concept of "basal cell functions" that virtually all cells possess (mitochondria, plasma membrane integrity, etc.) and suggested that, for most substances, toxicity is a consequence of non-specific alterations in those cellular functions, which may then lead to effects on organ-specific functions and/or death of the organism. These effects may involve the integrity of membranes and the cytoskeleton, cellular metabolism, the synthesis and degradation or release of cellular constituents or products, ion regulation, and cell division.

Ekwall (1983) and others (Grisham and Smith 1984) concluded that, since the actions of substances that produce injury and death are ultimately exerted at the cellular level, *in vitro* cytotoxicity assays may be useful for the prediction of acute lethal potency. Considerable research has been undertaken to develop and evaluate *in vitro* tests for use as screens and as potential replacements for LD<sub>50</sub> tests. Good agreement between cytotoxicity *in vitro* and animal lethality have been reported by numerous groups (see reviews by Phillips et al. 1990; Garle et al. 1994; Guzzie 1994). However, none of the proposed *in vitro* models have been evaluated in any formal studies for reliability and relevance, and their usefulness and limitations for generating information to meet regulatory requirements for acute toxicity testing have not been assessed.

### 1.3.1 Purpose and Mechanistic Basis of the *In Vitro* NRU Test Methods

There are a number of basal cytotoxicity endpoints that measure cell death and or cell proliferation. The NRU test methods were chosen for the NICEATM/ECVAM validation study because they were recommended in the *Guidance Document* for the purpose of obtaining cytotoxicity information to predict starting doses for acute systemic toxicity assays (ICCVAM 2001b). Both the 3T3 and NHK NRU test methods were reproducible in previous validation studies (ICCVAM 2001b). In addition, both cell types are easily obtainable from commercial sources and the *Guidance Document* provided preliminary evidence that these assays could reproduce the RC millimole regression. Additionally, the assays can be automated and they require no radioactivity or highly dangerous substances (see **Section 2** for the protocols).

Neutral red is a weakly cationic water-soluble dye that stains living cells (Borenfreund and Puerner 1985). It readily diffuses through the plasma membrane and concentrates in lysosomes where it electrostatically binds to the anionic lysosomal matrix. Toxins can alter the cell surface or the lysosomal membrane seeming to cause lysosomal fragility and other adverse changes that gradually become irreversible. Thus, cell death and/or inhibition of cell growth decreases the amount of neutral red taken up by the culture. The protocol for the NRU assay using 3T3 cells was first published by Borenfreund and Puerner (1985) as a two component test for toxicity screening that was standardized for a 96-well plate format. The two components were (1) a morphological examination of the cells under an inverted phase microscope and (2) a quantitative measurement of NRU. The morphological examination was designed to identify the highest tolerated dose for the assay (i.e., the highest concentration of toxicant that the cells can tolerate and that causes minimal morphological changes). This concentration was comparable to the quantitative measurement of 10% inhibition (i.e., NR<sub>90</sub> value compared to the controls) of NRU. The NR<sub>90</sub> value is the point where a test compound produces a significant toxic effect. The assay was said to be a rapid, reliable, inexpensive, and reproducible *in vitro* assay for screening potentially toxic agents, and it was suggested that the test was a good candidate for inclusion in a battery of tests for toxicity screening for the purpose of reducing the use of animals for toxicity tests.

### 1.3.2 Similarities and Differences in the Modes/Mechanisms of Action for the *In Vitro* NRU Test Methods Compared with the Species of Interest

Although the ultimate species of interest for acute systemic toxicity concerns is humans, labeling and hazard identification requirements are based on rodent studies. There are differences between humans and rodents in terms of absorption, distribution, metabolism, excretion, and the intrinsic sensitivity of target organs to xenobiotic compounds. The differences are largely substance specific. *In vitro* cytotoxicity studies have also noted differences in sensitivity between human cells and other mammalian cells (Clemedson et al. 1996).

Ekwall et al. (1998b) showed that *in vitro* cytotoxicity methods using human cell lines generally predicted human toxicity better than methods using other mammalian cell types. **Section 6** shows that, for the reference substances tested in this study, the 3T3 NRU test method usually predicted rodent acute toxicity better than the NHK NRU test method did. A human cell type, such as the NHK, may predict human toxicity better than 3T3 cells, which originate in mice (this evaluation is not reported in this BRD, but will be reported elsewhere).

Besides the species differences, there are several other differences between the 3T3 and NHK cells.

- The 3T3 cells are an immortal line, while the NHK cells are primary cells.
- They originate from different tissues; 3T3 cells are derived from embryonic fibroblasts, while the NHK cells come from neonatal foreskin tissue.
- NHK cells grow more slowly in culture than the 3T3 cells.
- NHK cells have greater ability to metabolize xenobiotic compounds, in that they exhibit some cytochrome P450 activity (Babich et al. 1991). 3T3 cells have practically no ability to metabolize xenobiotic compounds (INVITTOX 1991).

### 1.3.3 Range of Substances Amenable to the *In Vitro* NRU Test Methods

The *in vitro* NRU test methods can be applied to a wide range of substances as long as the substances can be dissolved in the cell culture medium or in a solvent that can be mixed with culture medium. Although these test methods may to be applicable to mixtures, none were

636 evaluated in this validation study. The toxicity of substances with specific mechanisms of  
637 toxicity not expected to be active in 3T3 or NHK cells (e.g., those that are neurotoxic,  
638 cardiotoxic, interfere with energy utilization, or alkylate proteins and other macromolecules)  
639 will likely be underpredicted by these test methods. Therefore, until a more predictive  
640 approach is developed, the results from basal cytotoxicity testing with such substances may  
641 not be appropriate.

642  
643 Insoluble substances or those unstable or explosive in water are not compatible with the test  
644 system. Volatile substances may yield acceptable results if CO<sub>2</sub> permeable plastic film is  
645 used to seal the test plates. Testing for corrosive substances is unnecessary since there is no  
646 regulatory requirement for acute systemic toxicity testing for corrosives. The toxicity of  
647 substances that are highly bound to serum proteins may be underestimated by the 3T3 assay  
648 since the culture medium contains 5% serum during substance exposure. The toxicity of  
649 substances that specifically affect lysosomes may be overestimated since they may affect  
650 NRU. Red substances that absorb light in the optical density range of NR may interfere with  
651 the test if they remain inside the cell in sufficient amounts after washing and are soluble in  
652 the NR solvent.



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## 2.0 TEST METHOD PROTOCOL COMPONENTS OF THE 3T3 AND NHK *IN VITRO* NRU TEST METHODS

The *Guidance Document* (ICCVAM 2001b) recommended that the following conditions be incorporated into any *in vitro* cytotoxicity protocol used to predict *in vivo* acute lethality:

- use a cell line (or primary cells) that divides rapidly
- use an initial seeding density that allows rapid growth throughout the exposure period
- apply reference substances only on cells in the exponential phase of growth
- use a reference substance exposure period at least the duration of one cell cycle
- use appropriate positive and vehicle control substances for which cytotoxicity, or lack of cytotoxicity, has been well characterized by the performing laboratory
- use solvents only at levels previously shown not to cause cytotoxicity to the cell system over the entire period of the assay
- use a well established measurement endpoint that has good interlaboratory reproducibility
- use tests compatible with 96-well plates and apparatus (i.e., spectrophotometers) that allow a quick and precise measurement of the endpoint
- use a progression factor in the concentration-response experiment that yields graded effects between no effect and total cytotoxicity

**Section 2.1** provides descriptions of the protocol applications to the NICEATM/ECVAM *In Vitro* Cytotoxicity Validation Study. **Section 2.2** provides details for performing the 3T3 and NHK NRU test methods and explains the rationale for various test method components. The basis for the selection of these *in vitro* cytotoxicity test methods is given in **Section 2.3** and proprietary aspects associated with this study are described in **Section 2.4**. **Section 2.5** discusses the basis for replicate and repeat tests. **Section 2.6** details the modifications and revisions made throughout all phases leading to the development of the final protocol used in Phase III of this validation study. **Section 2.7** shows the differences between the test methods used in this study and the test methods outlined in the *Guidance Document*.

Sections 2.8 and 2.9 provide details on the solubility protocol for the reference substances used in to validate the two *in vitro* NRU cytotoxicity test methods.

These test method protocols were provided to the three cytotoxicity testing laboratories that participated in the NICEATM/ECVAM study (see Section 5.6.3 for additional laboratory information):

- ECBC: The U.S. Army Edgewood Chemical Biological Center
- FAL: Fund for the Replacement of Animals in Medical Experiments (FRAME) Alternatives Laboratory
- IIVS: Institute for *In Vitro* Sciences

A fourth laboratory was used (BioReliance Corporation, Rockville, MD) to procure and distribute the coded reference substances and to perform solubility tests on all validation study reference substances prior to distribution to the cytotoxicity testing laboratories.

## 2.1 Overview of the 3T3 and NHK NRU Test Methods

The authors of the *Guidance Document* (ICCVAM 2001b) developed and presented a proposed 3T3 NRU protocol for use in a validation study based on the BALB/c 3T3 Cytotoxicity Test, INVITTOX Protocol No. 46 (available at the FRAME-sponsored INVITTOX database [<http://embryo.ib.amwaw.edu.pl/invittox/>]) which in turn was based on the Borenfreund and Puerner (1985) protocol, as elaborated on in Spielmann et al. (1991) and Spielmann et al. (1996).

The *Guidance Document* protocol also included revisions based on experience with a modification of another test, the 3T3 NRU Phototoxicity Test, INVITTOX Protocol No. 78, also available at the FRAME database. The Registry of Cytotoxicity (RC) regression for prediction of acute oral systemic rodent (rat and mouse) toxicity (Halle 1998; Spielmann et al. 1999) was included as the prediction model (see Section 1.1.2). The RC is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro*

cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for chemicals with known molecular weights.

The NHK NRU test method protocol in the *Guidance Document* was based on a NRU test method by Borenfreund and Puerner (1984) using human epidermal keratinocytes (Heimann and Rice 1983) and was obtained from IIVS. Formulations for the media and solutions and general NHK cell culture techniques correspond to Clonetics® products from the CAMBREX Corporation. The authors of the *Guidance Document* expanded the IIVS protocol by adding details on equipment, media and reagent components, and experimental procedure.

The test method protocol components for the *in vitro* NRU cytotoxicity test methods used in the NICEATM/ECVAM study are very similar for both the 3T3 and the NHK cells (see **Figure 2-1**). The following procedures are common to both cell types:

- preparation of reference substances and positive control
- cell culture environmental conditions
- determination of test substance solubility
- 96-well plate configuration for testing samples
- range finder and definitive tests (48-hour exposure to the reference substance)
- microscopic evaluation of cell cultures for toxicity
- measurement of NRU
- data analysis

The main differences in the test methods are:

- the conditions of propagation of the cells in culture
- the cell growth medium components
- the application of reference substances to the 96-well plate (i.e., different volumes of reference substance solution)

The nature of the NRU response is described in **Section 1.3.1**. **Figure 2-1** provides an overview to the major steps for performance of the *in vitro* NRU cytotoxicity test methods.

**Figure 2-1 Major Steps for Performance of the NRU Test Methods in the  
In Vitro Cytotoxicity Validation Study**

- (1) 3T3 cells or NHK cells are seeded into 96-well plates to form a sub-confluent monolayer (24 hours for 3T3 cells, 48-72 hours for NHK cells)
- ↓
- (2) Culture medium is removed (for 3T3 cells only)
- ↓
- (3) Reference substances in treatment medium are added to the cells; cells are exposed for 48 hours to the reference substance over a range of eight (8) concentrations
- ↓
- (4) Cells are evaluated microscopically for toxicity based on morphological alterations
- ↓
- (5) Treatment medium is removed; cells are washed once with Dulbecco's Phosphate Buffered Saline (D-PBS); Neutral Red (NR) dye medium is added (3T3 cells: 25 µg/mL NR dye; NHK cells: 33 µg/mL NR dye); plates are incubated for 3 hours
- ↓
- (6) NR medium is discarded; cells are washed once with D-PBS; NR desorbing fixative is added to the plates
- ↓
- (7) Plates are shaken for 20 minutes
- ↓
- (8) NR absorption is measured at optical density (OD) 540 ± 10 nm
- ↓
- (9) NRU is calculated as the % of control values to define IC<sub>20</sub>, IC<sub>50</sub>, and IC<sub>80</sub> reference substance concentrations (µg/mL)<sup>1</sup>

<sup>1</sup> IC<sub>50</sub> values are used for estimating the LD50 value of a reference substance. The IC<sub>20</sub> and IC<sub>80</sub> values were collected (as per request in the validation study's Statement of Work [SOW]) for possible use in estimating human lethal concentrations in blood.

### 2.1.1 The 3T3 NRU Test Method

#### *Initiating and Subculturing of 3T3 Cells*

(CCL-163, 3T3 BALB/c mouse fibroblast, clone 31, American Type Culture Collection [ATCC], Manassas, VA, USA)

Cryopreserved 3T3 cells are thawed, resuspended in a routine culture medium containing Dulbecco's Modification of Eagle's Medium (DMEM) supplemented with non heat-inactivated 10% newborn calf serum (NCS), transferred into tissue culture flasks (25 or 75 - 80 cm<sup>2</sup>), and incubated at 37°C ± 1°C, 90% ± 5% humidity, and 5.0% ± 1% CO<sub>2</sub>/air. When cells reach 50 – 80% confluency (as estimated from a visual inspection of cell density), they are removed from the flask by trypsinization. A single-cell suspension is added to new flasks for propagation and the cells are passaged/subcultured at least two times before seeding into 96-well plates for test assays. Subsequent passages may be maintained in culture for approximately two months (~18 passages) and used in NRU test methods. A new frozen ampule is thawed when needed and the above procedures are repeated. The protocols provide cell culture density guidelines for subculturing the cells and each laboratory determines the final seeding densities to achieve appropriate growth.

#### *Preparation of Cells for 96-well Plate Assays*

After achieving appropriate subculturing of cells, 100 µL of the cell suspension (2.0 – 3.0x10<sup>3</sup> cells/well) are placed in the appropriate wells and 100 µL of cell-free culture medium are dispensed into the peripheral wells (blanks). One plate per reference substance is prepared. The cells are incubated for 24 ± 2 hours and checked to be sure that approximately a half-confluent monolayer is attained at the time of reference substance application.

#### *Reference Substance Application*

After the appropriate incubation period, medium is removed and 50 µL of the routine culture medium with 10% NCS are added to each well. Then, 50 µL treatment medium containing the appropriate reference substance concentrations are added for a final concentration of 5% NCS. The cells are incubated for 48 ± 0.5 hours. At the end of the incubation period, the

cells are microscopically evaluated for changes in morphology and their appearance is documented (as per Visual Observation Codes in the protocol) prior to measurement of the NRU of the cells.

#### 2.1.2 The NHK NRU Test Method

##### *Initiating and Subculturing of NHK Cells*

(pooled primary neonatal foreskin cells, Clonetics® # CC-2507, lot # 1F0490N, CAMBREX Bio Science Walkersville, Inc., Walkersville, MD, USA)

Cryopreserved cells are thawed, resuspended in keratinocyte complete growth medium, transferred into tissue culture flasks (25 cm<sup>2</sup> without fibronectin-collagen coating), and incubated at 37°C ± 1°C, 90% ± 5% humidity, and 5.0% ± 1% CO<sub>2</sub>/air. When cells reach 50 – 80% confluency (as estimated from a visual inspection of cell density), they are removed from the flask by trypsinization and prepared for subculturing into the 96-well plates. Keratinocytes are not subcultured beyond the second passage. Additional frozen ampule(s) are thawed as needed. The protocols provide cell culture density guidelines for establishing the cells out of cryopreservation and each laboratory determines the final seeding densities to achieve appropriate growth.

##### *Preparation of Cells for 96-well Plate Assays*

After appropriate subculturing of cells is achieved, 125 µL of the cell suspension (2.0 – 2.5x10<sup>3</sup> cells/well) are placed in the appropriate wells and 125 µL of cell-free culture medium are dispensed into the peripheral wells (blanks). One plate per reference substance is prepared. The cells are incubated for ~ 48 - 72 hours and checked to be sure that a monolayer of 20+% confluency (e.g., 20 – 50% confluency) is attained at the time of reference substance application.

##### *Reference Substance Application*

After the appropriate incubation period, 125 µL of the culture medium containing the appropriate reference substance concentrations are added to the test wells (the existing 125 µL of culture medium is not removed). The cells are incubated for 48 ± 0.5 hours. At the



end of the incubation period, the cells are microscopically evaluated for changes in morphology and their appearance is documented (as per Visual Observation Codes in the protocol) prior to measurement of the NRU of the cells.

#### 2.1.3 Measurement of NRU for both 3T3 and NHK Test Methods

The treatment medium is removed from the 96-well plates, the cells are rinsed with phosphate buffered saline (PBS), 250 µL NR dye medium is added to the wells (25 µg NR/mL concentration for 3T3 cells, 33 µg NR/mL concentration for NHK cells), and the plates are incubated (37°C ± 1°C, 90% ± 5% humidity, and 5.0% ± 1% CO<sub>2</sub>/air) for three hours. After incubation, the NR medium is removed, the cells are rinsed with PBS, and the desorb solution is applied. The plates are shaken on a microtiter plate shaker for 20 to 45 minutes to extract NR from the cells and form a homogeneous solution. The absorption (i.e., OD measurement) of the resulting colored solution is measured (within 60 minutes of adding the desorb solution) at 540 nm ± 10 nm in a spectrophotometric microtiter plate reader, using the blanks as reference. Data from the plate reader is transferred to a Microsoft® EXCEL® (Microsoft Corporation, Redmond, WA, USA) spreadsheet template (hereafter know as EXCEL® template) designed by the SMT and laboratories for statistical analyses for this study.

## 2.2 **Descriptions and Rationales of the 3T3 and NHK NRU Test Methods**

The protocols used in Phases I, II, and III of the validation study (**Appendices B and C**) are modifications of the protocols reported in the *Guidance Document* (ICCVAM 2001b, **Appendix D**). The SMT and the cytotoxicity laboratories provided comments and recommendations in the development of these protocols. The following information is specific to the NICEATM/ECVAM validation study.

### 2.2.1 Materials, Equipment, and Supplies

#### *3T3 Cells*

3T3 cells (see **Section 2.1.1**), an immortalized mouse fibroblast cell line, were procured from the ATCC by IIVS at passage number 64. IIVS placed the cells in culture to expand the

number of cells and cryogenically-preserved them as a pool at passage number 69. ECBC and FAL received frozen ampules of cells at passage number 69 from IIVS, propagated the cells, and cryopreserved multiple ampules of cells at a slightly higher passage number to establish a working cell bank (for each laboratory) for use throughout the study.

#### *NHK Cells*

These normal human epidermal keratinocytes are primary neonatal foreskin cells pooled from several donors and were obtained from CAMBREX Bio Science Walkersville, Inc. (see **Section 2.1.2**). IIVS reserved the specific lot of pooled cells (stored at CAMBREX) for use throughout the study by all laboratories. At each laboratory, cryopreserved NHK cells are thawed from a cryogenic ampule, seeded into culture flasks, propagated according to protocol, then trypsinized and seeded into 96-well plates. NHK cells are passaged only once (to the 96-well plates) and each new assay begins with fresh cells from the cryogenically preserved working bank if NHK cells in the culture flasks are too confluent according to protocol guidelines.

#### *Tissue Culture Materials and Supplies*

The 3T3 and NHK NRU test methods require general tissue culture materials and supplies (see **Appendices B-1 and B-2** [protocols] for formulations and concentrations of solutions and media). Both test methods use the same materials for solubility testing (**Section 2.8.1**). Freshney (2000) provides information on all aspects of cell culture including materials, supplies, and equipment needed. The following materials are needed for both test methods:

- trypsin (i.e., 0.05% trypsin)
- PBS
- Hanks' Balanced Salt Solution (HBSS) without  $\text{Ca}^{2+}$  and  $\text{Mg}^{2+}$
- NR dye
- glacial acetic acid
- dimethyl sulfoxide (DMSO)
- ethanol (ETOH)
- distilled water

305

306 *Culture Medium*

307 Medium for 3T3 cells consists of DMEM containing high glucose (4.5 gm/L) and  
308 supplemented with non heat-inactivated NCS, L-glutamine, penicillin, and streptomycin.

309 The culture medium for NHK cells consists of Clonetics® keratinocyte basal medium  
310 (KBM®) supplemented with KBM® SingleQuots® (epidermal growth factor, insulin,  
311 hydrocortisone, antimicrobial agents, bovine pituitary extract) and Calcium SingleQuots®  
312 (calcium)[all from CAMBREX Corporation].

313

314 *Cell Culture Materials*

315 Laboratory items needed include the following:

- 316 • sterile, disposable tissue culture plasticware (e.g., 25 cm<sup>2</sup> - 75 cm<sup>2</sup> flasks,  
317 multiwell/microtiter plates [96-well], petri dishes) `
- 318 • cryogenic ampules
- 319 • pipettes, pipette tips
- 320 • multichannel solution reservoirs
- 321 • centrifuge tubes
- 322 • microporous sterilization filters
- 323 • general plastic containers
- 324 • glass tubes (for preparation of reference substance dilutions)

325

326 *Equipment*

327 Performance of the NRU test methods requires a laboratory equipped with a designated cell  
328 culture area. Essential equipment for cell culture work and the NRU test method includes:

- 329 • incubator (37°C ± 1°C, 90% ± 5% humidity, 5.0% ± 1% CO<sub>2</sub>/air)
- 330 • laminar flow clean bench/cabinet (standard: "biological hazard")
- 331 • water bath (37°C ± 1°C)
- 332 • inverted phase contrast microscope
- 333 • centrifuge (capable of 220 x g)
- 334 • laboratory balance (capable of measuring to 10 mg)

- 96-well plate spectrophotometer (i.e., microtiter plate reader) equipped with 540 nm  $\pm$  10 nm filter
- shaker for microtiter plates
- cell counter or hemocytometer
- pipetting aid
- pipettes, pipettors (multi-channel and single channel, multichannel repeater pipette)
- waterbath sonicator
- refrigerator
- freezer
- cryostorage container (liquid nitrogen).
- magnetic stirrer
- antistatic bar ionizer
- personal computer
- osmometer
- pH meter

### 2.2.2 Reference Substance Concentrations/Dose Selection

Each laboratory prepares the reference substance immediately prior to testing (i.e., same day as test). Bulk solutions are not prepared for subsequent testing. The highest concentration of dissolved reference substance is identified using the solubility protocol and designated as the 2X stock solution. All reference substance dilutions for the assay are serially derived from the stock solution (see **Appendix D** [*Guidance Document*] for serial dilution methods).

#### *Range Finder Test*

A range finder test is the initial 3T3 and/or NHK NRU test method performed to determine starting doses for the main (definitive) test. The range finder test uses eight concentrations of the reference substance prepared by diluting the stock solution in log dilutions to cover a large concentration range. The highest concentrations applied to the cells are 10 mg/mL for reference substances dissolved in culture medium and 1 mg/mL in medium for reference substances dissolved in DMSO, unless precluded by the solubility of the reference substance.

ETOH was not used as a solvent in NRU test methods for any of the 72 reference substances in the NICEATM/ECVAM study.

If a range finder test does not generate enough cytotoxicity, then a second range finder test is conducted at higher doses, unless precluded by solubility. If solubility is an issue, then more stringent solubility procedures are employed to increase the stock concentration (to the maximum concentration specified in **Appendices B-1 and B-2**). If the test produces a biphasic response curve for NR uptake, then the doses selected for the subsequent definitive tests (concentration-response assays) cover the most toxic dose-response range that includes the range where 50% toxicity is first exceeded (see **Section 2.6.3 – Unusual Dose-Response Curves**).

#### *Definitive Test*

In the following, because of its capacity to determine the  $IC_{50}$  value of a test compound, the main test of the *3T3 and/or NHK* NRU test method will be referred to as the definitive test. The concentration closest to the calculated  $IC_{50}$  value in the range finder test can serve as the midpoint of the eight concentrations tested in a definitive test. In the absence of other information (e.g., knowledge of slope for the toxicity curve), the recommended dilution factor is 1.47 ( $\sqrt[6]{10}$ ), which divides a log into six equidistant steps (e.g., 10, 14.7, 21.5, 31.6, 46.4, 68.1, 100), as a starting dilution series. A progression factor of 1.21 ( $\sqrt[12]{10}$ ) is regarded the smallest factor achievable and was the lowest dosing interval allowed in the validation study. The positive control chemical is tested similarly to the reference substances in the definitive test.

A successful definitive test is one that meets all of the test acceptance criteria as outlined in the protocol. Definitive tests were repeated as per the protocols if the test failed to meet all test criteria. **Section 2.5** addresses the basis for replicate testing.

If minimal or no cytotoxicity is measured in the dose range finding test, the maximum dose for a definitive test is as follows:

- Reference Substances Prepared in NHK or 3T3 Medium: the highest reference substance concentration applied to the cells in the definitive test is either 100 mg/mL (using 200 mg/mL 2X stock) or the maximum soluble dose. A review of the RC chemicals used in this study showed that, among water-soluble chemicals, glycerol had the highest reported IC<sub>50</sub> value (57 mg/mL). To capture this value during testing and that of other relatively non-toxic chemicals, the 100 mg/mL upper concentration limit was established.
- Reference Substances Prepared in DMSO: the highest test article concentration applied to the cells in the definitive test is either 2.5 mg/mL, or the maximum soluble dose.

### 2.2.3 NRU Endpoints Measured

#### *Neutral Red Uptake and Measurement*

After cells are exposed to the reference substance or the positive control chemical for the specified period, 3T3 or NHK cells are incubated with the NR dye for three hours, the dye is eluted from the lysosomes using a desorb solution, and the OD of the resulting colorimetric endpoint is measured using a spectrophotometric microtiter plate reader. The OD values are a reflection of the NRU by the cells. The greater the OD value is, the greater the NRU and the higher the percent viability<sup>2</sup> of the cells is in reference to the vehicle control (VC) wells. These OD data are transferred to the EXCEL<sup>®</sup> template. The mean OD values of the six replicate values (six wells [minimum of four] in the 96-well plate) per test concentration are used to determine relative cell viability by calculating its percentage of the mean NRU of all VC values on the same plate.

#### *Determination of IC<sub>50</sub>, IC<sub>20</sub>, and IC<sub>80</sub> Values*

The IC<sub>50</sub> values are determined from the concentration response using a Hill function which is a four parameter logistic mathematical model relating the concentration of the reference substance to the response (typically following a sigmoidal shape). Information on

---

<sup>2</sup> Vehicle control wells are considered to have 100% cell viability (i.e., all cells are alive). Cell viability in other test wells is referenced to the vehicle control value.

modifications to the Hill function used in later phases of the validation study may be found in **Section 2.6.3**.

Data from the EXCEL<sup>®</sup> template were transferred to a template designed by the SMT for a commercially available statistical software program (GraphPad PRISM<sup>®</sup> 3.0, GraphPad Software, Inc., San Diego, CA, USA – hereafter known as PRISM<sup>®</sup> template) to generate the inhibitory concentrations IC<sub>50</sub>, IC<sub>20</sub>, and IC<sub>80</sub> reported as µg/mL of reference substance in solution. IC<sub>20</sub> and IC<sub>80</sub> data were collected for potential use in designing a prediction model for estimating human lethal blood concentrations.

#### 2.2.4 Duration of Reference Substance Exposure

The SMT and laboratory representatives reevaluated the reference substance exposure duration recommended in the *Guidance Document* (ICCVAM 2001b) before initiating the NICEATM/ECVAM study. The *Guidance Document* recommends an exposure of 24 hours for the 3T3 cells and 48 hours for the NHK cells. The results from a cytotoxicity study by Riddell et al. (1986) show large differences in cytotoxicity in 3T3 cells induced by some chemicals depending on whether an exposure duration of 24 or 72 hours was used. IIVS conducted studies to evaluate the effect of exposure duration (24, 48, and 72 hours) on the sensitivity of 3T3 cells to six chemicals selected from the list in Riddell 1986. Since the closest fit to the RC regression line (Halle 2003) occurred when 48-hour exposure duration was used, this exposure duration is used in the standardized protocol for 3T3 cells (see **Appendix E**). In addition, IIVS evaluated the sensitivity of NHK cells to the same six chemical using exposure durations of 48 and 72 hours. To make a comparison with the RC regression, the 11 chemicals recommended by the *Guidance Document* were tested in both cell types using the same exposure durations. IIVS scientists concluded that the optimum exposure duration for both cell types was 48 hours (Curren et al. 2003). The SMT concurred and revised the exposure duration in the 3T3 protocol to 48 hours.

### 2.2.5 Known Limits of Use

#### *Solubility/Volatility*

*In vitro* cytotoxicity test methods are inadequate for substances that cannot be dissolved in media, DMSO, or ETOH at a sufficiently high concentration to induce cytotoxicity in excess of 50%. Some reference substance dilutions in this study had precipitates in various 2X concentrations prior to dilution for application to the test plates. Precipitates were observed in a number of test plates after addition of solutions to the cultures and at the end of testing (1X solutions [see **Section 3.5** and **Table 5-11**]). Volatility was detected for a number of reference substances during the range finder tests by observance of cross contamination of wells (i.e., high cytotoxicity in some VC wells). Some volatility was controlled by using plate sealers during the definitive tests (see **Section 2.6.3 – Testing Volatile Reference Substances**). Plate sealers could be used during the range finder tests if the laboratory suspected that the reference substance might be volatile. However, use of plate sealers requires additional laboratory skills and highly volatile reference substances are difficult to test even with the use of plate sealers. Additionally, some test substances (e.g., organic solvents) may react chemically with the plastic plate sealers. Also, chemicals that are unstable or exothermic in water cannot be adequately tested with these test methods.

#### *Biokinetic Determinations*

The Workshop report (ICCVAM 2001a) provides discussions on the role of the kinetics of a chemical *in vivo* vis a vis its acute systemic toxicity.

“Results obtained from *in vitro* studies in general are often not directly applicable to the *in vivo* situation. One of the most obvious differences between the situation *in vitro* and *in vivo* is the absence of processes regarding absorption, distribution, metabolism and excretion (i.e., biokinetics) that govern the exposure of the target tissue in the intact organism. The concentrations to which *in vitro* systems are exposed may not correspond to the actual situation at the target tissue after *in vivo* exposure. In addition, the occurrence of metabolic activation and/or saturation of specific metabolic pathways or absorption and elimination mechanisms may also become relevant for the toxicity of a compound *in vivo*. This may lead to misinterpretation of *in vitro* data if such information is not taken into account.



Therefore, predictive studies on biological activity of compounds require the integration of data on the mechanisms of action with data on biokinetic behavior.”

Biokinetic determinations were not specifically addressed in this study.

#### *Organ-Specific Toxicity*

The Workshop report also addresses concerns about which *in vitro* test methods can adequately predict organ-specific toxicity and identifies the organ systems in which failure after acute exposure could lead to lethality (liver, central nervous system, kidney, heart, lung, and hematopoietic system). Each system is reviewed individually and a five-step *in vitro* testing scheme (as opposed to a single *in vitro* test method) that could act as a test battery that may eventually be used as a replacement for *in vivo* acute toxicity testing is proposed.

- Step 1 of the proposed *in vitro* scheme recommends performing a physico-chemical characterization and biokinetic modeling.
- Step 2 promotes the use of a basal cytotoxicity test method (e.g., 3T3 and NHK NRU test methods).
- Step 3 calls for a test to determine the potential that metabolism will mediate the basal cytotoxicity effect.
- Step 4 is to assess the test substance’s effect on energy metabolism.
- Step 5 is to assess the ability of the substance to disrupt epithelial cell barrier function (ICCVAM 2001a).

Organ-specific toxicity and metabolic effects were not tested in this study.

#### 2.2.6 Nature of Response Assessed

Neutral red is a weakly cationic, water-soluble dye that stains living cells by readily diffusing through the plasma membrane and concentrating in lysosomes. The intensity of the dye in culture is directly proportional to the number of living cells. In addition, since altering the cell surface or the lysosomal membrane by a toxicological agent causes lysosomal fragility and other adverse changes that gradually become irreversible, cell death and/or inhibition of cell growth decreases the amount of neutral red taken up by the culture (see **Section 1.3.1**).

514

515 2.2.7 Appropriate Vehicle, Positive, and Negative Controls516 *Positive Control (PC)*

517 The *Guidance Document* recommended sodium lauryl sulfate (SLS, Chemical Abstracts  
518 Service Reference Number [CASRN] 151-21-3) as an appropriate PC chemical for *in vitro*  
519 cytotoxicity test methods (ICCVAM 2001b). SLS is frequently used for this purpose and  
520 historical data are available (e.g., Spielmann et al. 1991). A PC test plate was included with  
521 each run of any 3T3 and/or NHK NRU test method assay and was treated the same as any  
522 reference substance assay plate.

523

524 The acceptable range for the PC IC<sub>50</sub> was based on the statistical approach recommended in  
525 the *Guidance Document*. Initially, in Phase Ia of the validation study, the 3T3 and NHK tests  
526 were considered acceptable if the IC<sub>50</sub> was within the 95% confidence interval of an  
527 historical mean IC<sub>50</sub> value. The SMT decided that the test acceptance criterion for the IC<sub>50</sub>  
528 for Phase III of the validation study (for both cell types) was 2.5 standard deviations of the  
529 mean SLS IC<sub>50</sub> data obtained during Phases I and II. The exception to this was the FAL  
530 NHK data, where only the Phase II data were used as the basis for establishing the acceptable  
531 range for the PC. SLS data produced at FAL during Phase I was not used due to a protocol  
532 change in culturing the cells (see **Section 2.6.2 – Resultant protocol changes for Phase II**).  
533 The historical mean, standard deviation, and acceptance limits were determined separately  
534 for each laboratory (see **Table 5-2**).

535

536 *Vehicle Control (VC)*

537 For the NICEATM/ECVAM validation study, the VC consisted of complete DMEM (see  
538 **Appendix B-1**) for 3T3 cells and complete Clonetics® KBM® (see **Appendix B-2**) for NHK  
539 cells for reference substances dissolved in medium. For reference substances dissolved in  
540 DMSO, the VC consisted of medium with the same amount of solvent as that used in the  
541 reference substance concentrations that are applied to the 96-well test plate (i.e., 0.5 % [v/v]).

542

543 *Negative Control*

A negative control was not incorporated into the NRU test methods. The SMT and study directors decided that the vehicle control would be used in place of a negative control.

## 2.2.8 Acceptable Ranges of Control Responses

The *Guidance Document* established the use of the absolute value of the OD<sub>540</sub> value of NRU obtained in the untreated VC to indicate whether the cells seeded in the 96-well plate have grown exponentially with a normal doubling time during the assay. A mean OD<sub>540</sub>  $\geq 0.3$  was recommended as the acceptable range of VC responses and was made a test acceptance criterion for both cell types. Protocols for Phases II and III provide a range of OD values for use as guidance in each phase of the study.

**Table 2-1      Vehicle Control OD<sub>540</sub> Ranges**

Phase	OD <sub>540</sub> Range - 3T3	OD <sub>540</sub> Range - NHK	Notes
Ia	$\geq 0.3$ and $\leq 1.1$	$\geq 0.3$ and $\leq 1.1$	Test Acceptance Criterion
Ib	$\geq 0.30$ and $\leq 0.80$	$\geq 0.60$ and $\leq 1.70$	Test Acceptance Criterion
II	$\geq 0.103$ and $\leq 0.813$	$\geq 0.35$ and $\leq 1.50$	Target Range (not criterion)
III	$\geq 0.103$ and $\leq 0.813$	$\geq 0.205$ and $\leq 1.645$	Target Range (not criterion)

In Phase III, 99.5% (914/919) of all 3T3 mean VC OD values and 97% (913/944) of all NHK mean VC OD values were within the target range. Most OD values out of the ranges were from range finding tests and were usually the result of volatile reference substances affecting the VC cells nearest the highest reference substance concentration.

## *VCs as Quality Control*

To check for systematic cell seeding errors and potential volatility issues, untreated VCs were placed both at the left side (row 2) and the right side (row 11) of the 96-well plate (see **Appendices B-1 and B-2**). Volatile reference substances generally affect the left side VC (closest to the highest reference substance concentration). The test acceptance criterion was that the left and the right mean of the VCs did not differ by more than 15% from the mean of all VCs. This criterion was used in all phases of the study for reference substances and PC test plates.

### 2.2.9 Nature of Experimental Data Collected

Each laboratory maintained a Study Workbook to document all aspects of this study. All raw data from cell culture procedures (e.g., cell growth, application of reference substances, NRU test method, etc.) and all solubility studies were recorded in the workbook.

#### *NRU OD Measurements*

At the conclusion of the NRU desorb step, the OD of the resulting colored solution in each well of the 96-well plates was measured at  $540 \pm 10$  nm in a spectrophotometric microtiter plate reader. Raw OD data from the plate reader was transferred to the EXCEL<sup>®</sup> template. The template converts the raw data (six wells/reference substance concentration) to derived data by subtracting the mean blank value (two wells/reference substance concentration) associated with each reference substance concentration. The VCs had a total of 12 test wells and 20 blanks. The corrected OD values were referenced to the mean VC OD value and a relative viability (% of VC) was determined for each test well. The percent viability values was then transferred to the PRISM<sup>®</sup> template for calculation of the IC<sub>20</sub>, IC<sub>50</sub>, and IC<sub>80</sub> values.

#### *Type of Data Collected*

Originals of the raw data (the Study Workbook and computer printouts of absorbance readings from the plate reader) and copies of other raw data such as instrument logs were collected and archived under the direction of the Study Director according to Good Laboratory Practice (GLP)-compliant procedures.

The Study Director/technicians entered the following information to the EXCEL<sup>®</sup> template:

- raw data: OD values from microtiter plate reader
- testing identification for: test facility, chemical code, study number, 96-well plate number, experiment number
- reference substance preparation: solvent used, solvent concentration in dosing solutions, highest stock concentration, dilution factor, pH of 2X dosing solutions, medium clarity/color, presence/absence of precipitate in 2X solutions, PC concentration range

- cell line/type: cell supplier, lot number, cryopreserved passage number, passage number in assay
- cell culture conditions: medium/supplements and supplier and lot numbers, serum concentrations
- test acceptance criteria: acceptable number of values on each side of the IC<sub>50</sub> (i.e., number of points > 0 and ≤ 50% viability and > 50 and < 100% viability), acceptable % difference for the VCs, acceptable Hill function R<sup>2</sup> value (coefficient of determination) for the PC, and calculated IC<sub>50</sub> concentration for the PC
- timeline: dates for cell seeding, dose application, OD<sub>540</sub> determination
- test results: mean corrected OD<sub>540</sub> value, Hill function R<sup>2</sup> value, logs of IC<sub>20</sub>, IC<sub>50</sub>, and IC<sub>80</sub> (PRISM<sup>®</sup> template presents data as logs of the IC<sub>x</sub>; EXCEL<sup>®</sup> converts values to IC<sub>x</sub> in µg/mL)
- visual observations: protocol codes for cell culture conditions for all reference substance concentrations (i.e., relative level of cell cytotoxicity, cell morphology, presence of precipitate)

#### 2.2.10 Type of Media for Data Storage

Raw data from the NRU cytotoxicity test methods was saved in the EXCEL<sup>®</sup> template file format provided by the SMT for further analysis of the concentration-response (percent viability calculations). The derived test method data were stored electronically. All EXCEL<sup>®</sup> and PRISM<sup>®</sup> files were copied and transferred to compact disks. NICEATM and the laboratories printed copies of all data sheets (stored at NICEATM and at the testing facilities). Copies were also included in the final reports.

#### 2.2.11 Measures of Variability

Each 96-well plate used in the NRU test methods has three main measures of variability.

- 1) Each plate contains VCs on each end of the plate (columns 2 and 11). The percent difference between each column and the mean of both columns is calculated and was used as a test acceptance criterion. If the difference was

greater than 15%, then the test was rejected by the Study Director. This value is an indicator of reference substance volatility and potential cell seeding errors.

2) A mean relative viability was determined for each concentration along with the standard deviation and % coefficient of variation (CV).

3) Macros were included in the EXCEL<sup>®</sup> template to perform an outlier test (Dixon and Massey 1981) on data in each well of the test plate. Extreme values at the 99% level were highlighted and could be removed to improve curve fit. The decision as to whether or not to remove outliers was made by the Study Director.

Other test-to-test measures of variability were considered for this study.

- Each set of assays include a PC plate. If the SLS PC data did not meet test acceptance criteria, then all tests associated with that PC were rejected. The SMT recommended testing a manageable number of definitive test plates (e.g., 4 – 6) with each PC to avoid rejection of reference substance NRU assays that are unacceptable due only to a PC failure. In this validation study, 4.2% of all definitive tests performed were rejected only because the PC failed (i.e., the PC IC<sub>50</sub> was outside the acceptable confidence limits).
- Standard deviations and CVs were determined for mean IC<sub>50</sub> values from replicate testing of the same substance. Replicate testing included three definitive tests per reference substance, each performed on a different day.

#### 2.2.12 Methods for Analyzing NRU Data

A calculation of cell viability expressed as NRU was made for each concentration of the reference substance by using the mean NRU of the six replicate values (minimum of four acceptable replicates wells) per test concentration. This value was compared with the mean NRU of all VC values (provided VC values have met the VC acceptance criteria). Relative cell viability was expressed as percent of untreated VC. Raw OD data from the microtiter plate reader was transferred to the EXCEL<sup>®</sup> template for performance of these calculations. Where possible, the eight concentrations selected for each reference substance tested ranged from no effect up to 100% toxicity.

The IC<sub>20</sub>, IC<sub>50</sub>, and IC<sub>80</sub> values were determined from the concentration-response by using the PRISM<sup>®</sup> template and applying a Hill function to the data. The IC<sub>20</sub> and IC<sub>80</sub> values were calculated for use in the development of a human prediction model resulting from this study.

#### 2.2.13 Decision Criteria for Classification of Reference Substances

The 3T3 and NHK NRU test methods were not used to classify reference substances in hazard categories but rather to aid in setting the starting dose for acute systemic toxicity assays (i.e., the Up and Down Procedure [UDP], the Acute Toxic Class method [ATC], the Fixed Dose Procedure [FDP]). The RC regression formula (i.e., the prediction model) was used to predict an LD<sub>50</sub> value from an NRU IC<sub>50</sub> value. The RC compilation (Halle 2003) contains *in vitro* cytotoxicity information on 347 chemicals (i.e., one average IC<sub>50x</sub> value/chemical based on multiple reports in the literature) with corresponding *in vivo* acute oral LD<sub>50</sub> values (mmol/kg) for rats (282 values) or mice (65 values) from RTECS (See Halle 2003 for the RC data). **Section 6** addresses the potential of using the *in vitro* NRU cytotoxicity test methods for predicting the GHS hazard category.

#### 2.2.14 Information and Data Included in the Test Report

##### *Test and Control Substances*

(Laboratories in this study worked only with coded reference substances and could not know the specific reference substance information.)

- chemical name(s) such as the structural name used by the CASRN, followed by other names, if known
- the CASRN, if known
- formula weight, if known
- purity and composition of the substance or preparation (in percentage(s) by weight)
- physicochemical properties (e.g., physical state, volatility, pH, stability, chemical class, water solubility)
- treatment of the test/control substances (solubility efforts) prior to testing, if applicable (e.g., vortexing, sonication, warming, grinding)

- 694 • stability, if known

695 *Information Concerning the Sponsor and the Test Facility*

- 696 • name and address of the sponsor, test facilities, study director, and laboratory
- 697 technicians
- 698 • justification of the test method and protocol used

699 *Test Method Integrity*

- 700 • the procedure used to ensure the integrity (i.e., accuracy and reliability) of the
- 701 test method over time (e.g., use of the PC data)

702 *Criteria for an Acceptable Test*

- 703 • acceptable VC differences (between each column and the mean of both
- 704 columns)
- 705 • acceptable concurrent PC ranges based on historical data
- 706 • number of cytotoxicity points on either side of the IC<sub>50</sub> (i.e., number of points >
- 707 0 and ≤ 50% viability and > 50 and < 100% viability)

708 *Test Conditions*

- 709 • experimental start and completion dates
- 710 • details of test procedure used
- 711 • test concentration(s) used
- 712 • cell type used
- 713 • description of any modifications of the test procedure
- 714 • reference to historical data of the model (e.g., solvent and positive controls)
- 715 • description of evaluation criteria used

716 *Results*

- 717 • tabulation of data from individual test samples (e.g., IC<sub>50</sub> values for the
- 718 reference substance and the PC, reported in tabular form, including data from
- 719 replicate repeat experiments as appropriate, and means and the standard
- 720 deviation for each experiment)

721 *Description of Other Effects Observed*

- 722 • for example, cell morphology, precipitate, NR crystals

723 *Discussion of the Results*

724 *Conclusion*



### Quality Assurance (QA) Statement for GLP-Compliant Studies

- This statement indicates all inspections made during the study, and the dates any results were reported to the Study Director. This statement also serves to confirm that the final report reflects the raw data.

During this study, testing at IIVS and ECBC, the GLP-compliant laboratories, followed additional reporting requirements provided in the relevant guidelines (e.g., OECD 1998; EPA 2003a, 2003b; FDA 2003).

Standard forms for data collection, EXCEL<sup>®</sup> and PRISM<sup>®</sup> templates, were developed by the SMT and laboratories. The solubility test form was derived from a standard form provided by IIVS. The EXCEL<sup>®</sup> template was an adaptation of a template format presented in the *Guidance Document*.

## 2.3 Basis for Selection of the *In Vitro* NRU Cytotoxicity Test Methods

As stated in **Section 1**, Workshop 2000 participants recommended that the approach proposed by ZEBET (Halle 1998; Spielmann et al. 1999) be used for rapid adoption so that data could be generated to establish its usefulness with a large number of chemicals (ICCVAM 2001a). To assist in the adoption and implementation of the ZEBET approach, several workshop participants wrote the *Guidance Document* (ICCVAM 2001b). NICEATM and ECVAM used this document as the basis of test method protocol development and designed the validation study to evaluate the performance of the 3T3 and NHK NRU test methods.

### 2.3.1 Guidance Document Rationale for Selection of *In Vitro* NRU Cytotoxicity Test Methods

The *Guidance Document* (ICCVAM 2001b) provides basic protocols for using *in vitro* NRU basal cytotoxicity test methods as the means to predict a starting dose for *in vivo* acute lethality assays. The protocols take advantage of the relationship between *in vitro* IC<sub>50x</sub> values and *in vivo* LD<sub>50</sub> values derived from the RC for 347 chemicals (Halle and Spielmann

1992; Halle 2003). The 3T3 NRU and NHK NRU test method protocols used in the NICEATM/ECVAM validation study were derived from the document. Guidance was also provided for qualifying these tests for use with the RC regression to predict the starting dose.

The 3T3 NRU test method has been used most frequently in formal validation programs, all of which were aimed at evaluation of cytotoxicity in predicting eye irritancy. Large-scale studies include Phases I, II, and III of the Cosmetic, Toiletry, and Fragrance Association (CTFA) validation program (Gettings et al. 1991, 1992, 1994a, 1994b); the German eye irritation validation study (Spielmann et al. 1991, 1993, 1996); the European Commission/British Home Office (EC/HO) eye irritation validation study (Balls et al. 1995); and the European Cosmetic Toiletry and Perfumery Association (COLIPA) eye irritation study (Brantom et al. 1997). The 3T3 NRU Phototoxicity Test, a modification of the 3T3 NRU test, has been fully validated (Spielmann et al. 1998a,b), and has gained regulatory acceptance. See **Section 9** for comparison of these studies to this validation study.

### 2.3.2 Guidance Document Rationale for Selection of Cell Types

The Workshop (ICCVAM 2001a) concluded that there are no significant differences between the basal cytotoxicity results obtained using permanent mammalian cell lines, primary human cells, or using the IC<sub>50x</sub> approach of Halle and Spielmann (Halle 2003; Spielmann et al. 1999; Halle and Spielmann 1992). The Workshop recommended that near-term *in vitro* studies designed to reduce and refine animal testing in acute lethality tests should follow the ZEBET approach of using basal cytotoxicity assays in conjunction with the RC database. This can be one of the factors used to identify appropriate starting doses for *in vivo* acute lethality studies, as described by Spielmann et al. (1999).

#### *Cell Types for Basal Cytotoxicity Testing*

Established rodent (rat and mouse) cell lines were recommended because:

- it was assumed that such cells would give the best prediction of rodent (rat and mouse) acute lethality

- the use of an immortalized standard cell line that is easy to grow and readily available for *in vitro* cytotoxicity testing would hasten the generation of a database that can be used to analyze the usefulness of this approach

Human cells also offer potential advantages. An analysis of the RC rodent (rat and mouse) acute lethality data relative to cytotoxicity data generated using human cell lines in the MEIC program showed that both human and rodent cells were highly correlative ( $R^2=0.90$ ) (ICCVAM 2001). A long-term advantage of using human cells is that the human cell cytotoxicity data derived from *in vitro* cytotoxicity testing can be added to human toxicity databases to facilitate the development of test methods that may later better predict acute human lethality.

#### *Differentiated Cells for Metabolic Capabilities*

The *Guidance Document* explained why highly differentiated cells were not used in the basal cytotoxicity assays. Such cells may not give the best prediction of acute lethality for the large variety of chemicals likely to be tested for acute toxicity (Ekwall et al., 1998). For example, to eliminate the possibility of metabolic activation or inactivation of chemicals, neither hepatocyte nor hepatoma cytotoxicity data were included in the RC database. This does not preclude the use of hepatocytes in future studies, however, either to estimate cytotoxicity or to investigate the effect of metabolism or cell-specific toxicity (Seibert et al., 1996). Hepatocytes are essential to investigations of metabolism-mediated toxicity (Seibert et al., 1996).

The Workshop participants agreed that the current *in vitro* basal cytotoxicity tests do not take into account metabolism-mediated toxicity. Simple predictive systems (*in vitro* or *in silico*) must be developed for early identification of those substances likely to be metabolized to more toxic or less toxic species than the parent chemical (e.g., Fentem et al., 1993; Seibert et al., 1996; Curren et al., 1998; Ekwall et al., 1999). Participants concluded that the available *in vitro* assays require further development to accurately predict acute lethality (i.e., LD<sub>50</sub>). See **Section 3.3.4 – Metabolism** for metabolic information on the NICEATM/ECVAM reference substances.

### Historical Testing

Historical data exists for 3T3 cells including data from controlled and blinded validation studies (Gettings et al. 1991, 1992, 1994a, 1994b; Spielmann et al. 1991, 1993, 1996; Balls et al. 1995; Brantom et al. 1997). Human NHK or fibroblasts have also been used in validation studies for basal cytotoxicity test methods with good results (Willshaw et al. 1994; Sina et al. 1995; Gettings et al. 1996; Harbell et al. 1997). See **Sections 5, 6, 7, 8, and 9** for data generated for the NICEATM/ECVAM validation study.

## **2.4 Proprietary Components of the *In Vitro* NRU Cytotoxicity Test Methods**

The only proprietary components used in these test methods are the NHK cells and the NHK basal culture medium obtained from CAMBREX Clonetics®. All other components are readily available through various scientific product suppliers. The NHK cells consisted of pooled donor primary neo-natal foreskin keratinocytes from an unidentified source. The use of this specific supplier ensured that the laboratories would have access to the same source of keratinocytes throughout the entire validation study. Keratinocytes from other sources are acceptable if they meet the growth requirements identified in the protocols.

The contents of the NHK basal culture medium are proprietary, but the formulation is based on a commercially available basal medium (MCDB 153 formulation). This medium was chosen since it was recommended by the laboratories for use with the CAMBREX Clonetics® NHK cells and would be available for the laboratories throughout the study. Other media are acceptable for the NRU test methods if they meet the performance standards prescribed in the media prequalification protocol and achieve parity with the CAMBREX Clonetics® products (see **Appendix B-4** and **Section 2.6.3 – Inadequate Cell Growth in NHK Medium**).

## **2.5 Basis for Number of Replicate and Repeat Experiments for the 3T3 and NHK NRU Test Methods**

The NICEATM/ECVAM study protocols required each laboratory to test the reference substances in at least one range finding test using a log dilution factor and in at least three definitive tests on three different days using a smaller dilution factor than used in the range finding test. Assays were performed over a number of days to assess day-to-day variability.

Laboratories tested each coded reference substance until three definitive tests met the test acceptance criteria. Additional testing was often dictated by:

- chemical issues (low toxicity, volatility, insolubility, and precipitation)
- PC failure
- technical difficulties such as NR crystal formation

A stopping rule for insoluble reference substances was incorporated into the protocols to prevent infinite retesting:

“If the most rigorous solubility procedures have been performed and the assay cannot achieve adequate toxicity to meet the test acceptance criteria after three definitive tests, then the Study Director may end all testing for that particular chemical.”

## **2.6 Basis for Modifications to the 3T3 and NHK NRU Test Method Protocols**

### **2.6.1 Phase Ia: Laboratory Evaluation Phase**

All protocol revisions were implemented during Phase Ia unless otherwise stated.

#### *NR Dye Crystals*

NR dye crystals formed in the 96-well test plates in both NRU test methods when used at 50 µg/mL (OD values measured in the blanks increased from ~ 0.05 to 0.10). Troubleshooting efforts explored incubating the NR medium overnight, centrifuging, filtering, and reducing the concentration of NR dye. The laboratories performed tests using a reduced NR concentration of 33 µg/mL. Since there were no differences in results between tests with 50 µg/mL and tests with 33 µg/mL NR, the SMT accepted tests with both concentrations.

*Protocol Revision:* The NR dye concentration was reduced to 33 µg/mL for both cell types.

### *3T3 Cell Growth*

Cell growth for 3T3 cells was slower than expected in that the cells required more time in culture after seeding cells from the cryogenically-preserved pool into culture vessels to obtain the proper density.

*Protocol Revision:* 3T3 cells must be passaged 2-3 times after thawing before reference substance application/toxicity evaluation. The protocol also emphasized attainment of the percent cell confluency required for both cell types prior to reference substance application rather than the amount of time in culture.

### *NHK Cell Growth*

The NHK cells also had an additional growth problem that manifested as a ring of dead/dying cells around the center of the wells. Troubleshooting efforts included evaluating various brands of 96-well plates and eliminating the change of medium prior to reference substance treatment. All laboratories participated in evaluating the effect of changing (i.e., refeeding) or not changing (i.e., no refeeding) the medium by performing a small study with SLS, the PC. Tests were performed 1) after refeeding the cells with fresh medium, and 2) by adding SLS to the medium already on the cells. Control ODs were generally higher in the tests in which the medium was not replenished, but SLS sensitivity was unchanged (see **Table 2-2**). The SMT accepted both tests with refeeding and those without refeeding as long as they met the test acceptance criteria.

*Protocol Revision:* Step 2 of the NHK NRU test method was eliminated (change of medium prior to addition of reference substance). The volume of medium with cells placed into the 96-well plates was changed from 250 µL/well to 125 µL/well.

904 **TABLE 2-2 REFEEING/NO REFEEING DATA**

	ECBC <sup>1</sup>		HVS <sup>2</sup>		FAL <sup>3</sup>	
	Refeed	No Refeed	Refeed	No Refeed	Refeed	No Refeed
Number of Test Plates	4	4	6	6	2	4
Mean Abs. OD (VC)	0.265	0.621	0.885	1.12	1.41	1.24
Standard Deviation (SD)	0.151	0.322	0.057	0.033	0.127	0.430
SLS IC <sub>50</sub> (µg/mL)	3.33	3.23	3.41	3.49	6.21	8.14
SLS IC <sub>50</sub> SD	0.47	0.61	0.58	0.39	0.88	0.40

905 <sup>1</sup>Edgewood Chemical Biological Center906 <sup>2</sup>Institute for In Vitro Sciences907 <sup>3</sup>FRAME Alternatives Laboratory

908

909 The FAL laboratory could not get satisfactory levels of NHK cell adherence to the 80-cm<sup>2</sup>  
 910 culture flasks when seeded with thawed cells (one ampule) from the cryogenically-preserved  
 911 pool of cells.

912 *Protocol Revision (FAL only):* Culture flasks were to be coated with fibronectin-collagen  
 913 to promote adherence.

914

915 *OD Limits*

916 VC control OD limits (OD value must be  $\geq 0.3$  and  $\leq 1.1$  as related in the protocols) were  
 917 frequently unattainable in both test methods. Study Directors reported that the cells were  
 918 adequately responsive and were neither senescent nor 100% confluent. The SMT withdrew  
 919 the VC control OD limits as a test acceptance criterion.

920 *Protocol Revision for Phase Ib:* OD data from all laboratories, a review of cell  
 921 responsiveness (i.e., dose response data), and the ability of each test to pass the other  
 922 acceptance criteria were analyzed for both cell types and new OD ranges were calculated  
 923 as guidelines for each cell type.

924

925 *Precipitate Formation*

926 During solubility testing, precipitates were occasionally observed in the 3T3 medium but not  
 927 in the NHK medium at the same reference substance concentrations. Some liquid reference

substances (e.g., 2-propanol) caused precipitation in the 3T3 medium only. The precipitates were attributed to the serum in the 3T3 medium rather than insoluble reference substance.

*Protocol Revision:* The reference substance was dissolved in 3T3 medium without NCS. Then, for reference substance exposure, the dissolved 2X reference substance was added to medium containing 10% NCS to reach the final 5% NCS and 1X reference substance concentrations.

#### *Dilution Factor*

Once a range finder test had been performed, the definitive test assays were to be performed using a  $\sqrt[6]{10} = 1.47$  dilution scheme centered on the  $IC_{50}$ . The laboratories sometimes deviated from the protocols and used dilution factors other than the required one. The SMT accepted data generated using dilution factors other than the recommended 1.47 for definitive tests if all other test acceptance criteria were met. The use of smaller dilution factors generally increased the number of points between 10 - 90% viability and the precision of the  $IC_{50}$  calculation was improved.

*Protocol Revision:* The  $\sqrt[6]{10} = 1.47$  dilution scheme was presented as a suggestion and was not a criterion for test acceptance after Phase Ia.

#### *Test Acceptance Criteria*

*The test acceptance criteria for Phase Ia were:*

- the  $IC_{50}$  for SLS was within the 95% CI of the historical PC mean established by the Test Facility (*not applicable to Phase Ia*)
- mean OD values of the left and right VCs (columns 2 and 11 in the 96-well test plate) did not differ by more than 15% from the mean of all VC OD values
- at least two calculated cytotoxicity values, one on either side of the  $IC_{50}$ , between 10 and 90% viability (*added after commencement of Phase Ia*)
- Hill function coefficient of determination  $R^2 > 0.9$  or  $0.8 < R^2 < 0.9$  and curve fit was evaluated on a case by case basis for acceptability by the SMT (*added after commencement of Phase Ia*); (note: this determination would be made by the Study Director in non-validation studies)



- OD<sub>540</sub> of VCs (with blank subtracted) was  $\geq 0.3$  and  $\leq 1.1$  (*rescinded after commencement of Phase Ia*)

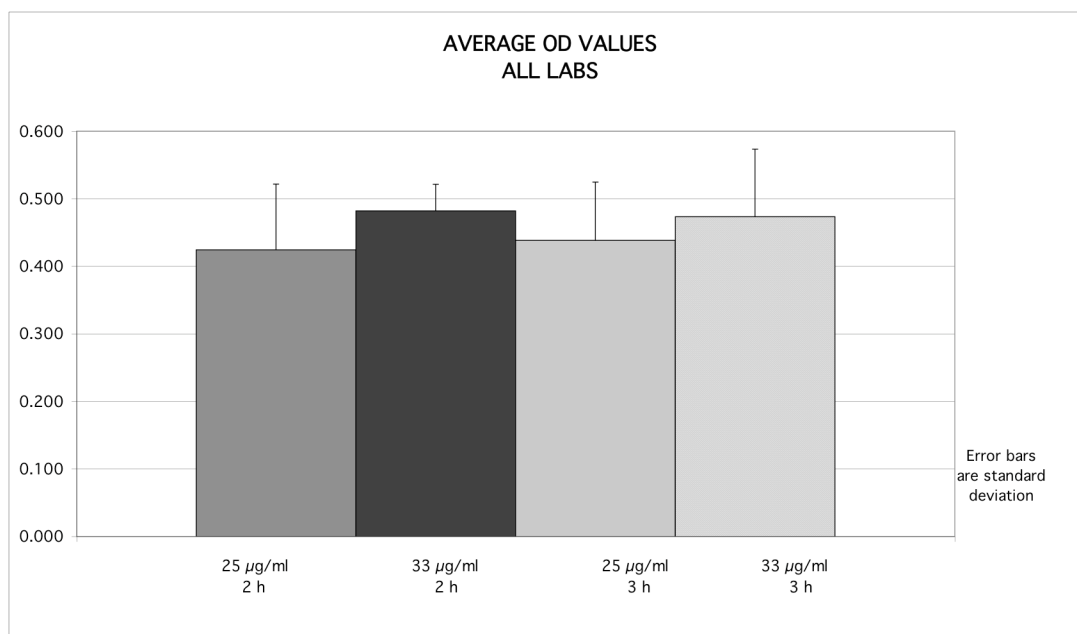
## 2.6.2 Phase Ib: Laboratory Evaluation Phase

### *NR Crystal Formation*

FAL and ECBC routinely observed NR crystals forming in the 96-well test plates in 3T3 assays at 33  $\mu\text{g/mL}$  NR. All laboratories tested 25 and 33  $\mu\text{g/mL}$  NR concentrations and 2- and 3-hour exposure durations to determine which exposure duration would provide optimal NRU without crystal formation. In addition to determining whether NRU had reached a plateau at these concentrations and durations, the laboratories also tested SLS to determine whether sensitivity to SLS differed under these conditions. Crystals were observed only at 33  $\mu\text{g/mL}$  NR when present for 3 hours. **Figure 2-2** shows that the average OD results were very similar for the concentrations and durations tested. **Figure 2-3** shows that the SLS IC<sub>50</sub> was approximately the same at these concentrations and durations. To minimize changes for the Phase III protocol, the SMT and laboratories agreed to use 25  $\mu\text{g/mL}$  NR for three hours in the subsequent protocol revisions for the 3T3 test method. The NR concentration for the NHK NRU test method remained at 33  $\mu\text{g/mL}$ .

*Protocol Revision for Phase II:* The NR concentration for the 3T3 NRU test methods was changed to 25  $\mu\text{g/mL}$  NR for the three-hour incubation. Revised methods for preparation of the NR dye solution included filtration of the solution, maintenance of the solution at 37°C, and application of the NR dye solution to the cells within 15 minutes after removing from 37°C. Cells should be observed during the NR incubation period of the 3T3 and/or NHK NRU test method assays to monitor possible crystal formation.

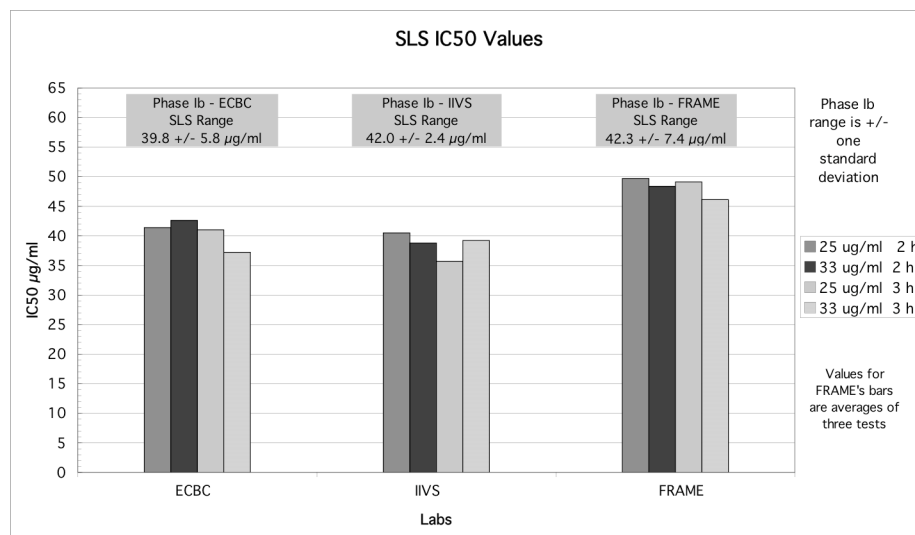
982 **Figure 2-2 Optical Density with NR Concentration and Duration**



983

984

985 **Figure 2-3 SLS IC<sub>50</sub> for Each NR Concentration and Duration**



986

987

### 988 *Heating Reference Substance Solutions*

989 The laboratories had difficulty with the solubility of arsenic trioxide. Mechanical  
 990 applications for solubilizing reference substances into culture medium were reviewed and  
 991 revised.

*Protocol Revision for Phase II:* The range for duration of heating the reference substance solution was increased from 5 – 10 minutes to 5 – 60 minutes.

#### *OD Readings*

OD readings were frequently lower than acceptance criteria for the VC wells.

*Protocol Revision for Phase II:* The OD range was eliminated as a test acceptance criterion. The OD data from the VCs in the laboratories for both cell types was used to calculate OD ranges to serve as guidelines (see **Section 2.2.9**).

To adjust for potential reference substance interference with NR dye, the reference substance was added to the blank wells that were used to generate the background OD at 540 nm that was subtracted from the reference substance concentration ODs. Each reference substance concentration was applied to six wells containing cells and to two blank wells without cells.

#### *Laboratory Error Rates*

The SMT suggested that FAL needed additional guidance to become more GLP-like (e.g., improve documentation) and to improve performance (i.e., fewer test failures and errors) throughout Phases Ib and II. The SMT compiled a list of the errors (e.g., transcriptional and typographical errors in the data sheets) and error rates (number of tests with errors/number of tests) for the existing Phase Ib data and provided the information to each laboratory (see **Table 2-3**). IIVS management sponsored a weeklong laboratory training exercise at the IIVS facilities so that FAL technicians would have exposure to a GLP laboratory environment. ECBC was invited to participate and all three testing laboratories shared information and thereby harmonized procedures during the training exercise. Harmonization of the laboratory procedures illustrated the need to make additional protocol revisions.

1017 **Table 2-3 Error Rates<sup>a</sup> in Phase Ib by Laboratory and Test Method**

Laboratory	NRU Test Method	
	3T3	NHK
ECBC	1/9 (10%)	4/17 (23%)
FAL	42/45 (93%)	12/29 (41%)
IIVS	1/20 (5%)	1/20 (5%)

<sup>a</sup>Number of tests with errors/total number of tests (some data files had more than one error)

1020 *Resultant protocol changes for Phase II*1021 *The protocol changes include:*

- 1022 • use multi-channel repeater pipettes for plating cells in the 96-well plates,
- 1023 dispensing plate rinse solutions, NR medium, and desorb solution, but not for
- 1024 dispensing reference substances to the cells; repeater pipettes are not accurate
- 1025 enough to deliver equal quantities of the reference substance solution to the
- 1026 wells
- 1027 • use 8-channel reservoirs for applying dosing solutions to the wells so multi-
- 1028 channel single delivery pipettes could be used
- 1029 • use a standardized length of time that HBSS rinses remain on the cell
- 1030 monolayers in flasks during the cell subculturing step
- 1031 • protect plates from high light levels during the shaking step for NR extraction;
- 1032 all laboratories will cover plates (e.g., with aluminum foil) during this step
- 1033 • allow plates to stand for at least five minutes after the shaking step is complete
- 1034 and break any bubbles observed in the wells before measuring OD
- 1035 • change the seeding density range for 3T3 NRU test method from  $2.5 \times 10^3$
- 1036 cells/well to  $2 - 3 \times 10^3$  cells/well
- 1037 • change NHK culture flask size (at FAL) from  $80\text{-cm}^2$  (for start-up of
- 1038 cryopreserved cells) to  $25\text{-cm}^2$  (same as other laboratories) and discontinue
- 1039 using a fibronectin-collagen coating

1041 *Test Acceptance Criteria*1042 *Criteria were modified as follows:*

- the IC<sub>50</sub> for SLS (PC) is within 2 SDs (approximately 95%) of the historical mean established by each laboratory in Phase Ia (originally used the 95% confidence interval)
- mean OD values of the left and right VCs (columns 2 and 11 in the 96-well test plate) do not differ by more than 15% from the mean of all VC OD values
- at least one calculated cytotoxicity value is between 10 and 50% viability and one calculated cytotoxicity value between 50 and 90% viability
- Hill function  $R^2 > 0.9$  or  $0.8 < R^2 < 0.9$  and curve fit is evaluated on a case by case basis for acceptability by the SMT (note: this determination would be made by the Study Director in non-validation studies)
- VC OD criteria are based on Phase Ia data (mean  $\pm$  two SDs): 0.3-0.8 for the 3T3 test method, and 0.6-1.7 for the NHK NRU test method (*rescinded after commencement of Phase Ib*)

### 2.6.3 Phase II: Laboratory Qualification Phase

All revisions were implemented during Phase II unless otherwise stated.

#### *Testing Volatile Reference Substances*

When 2-propanol was tested according to the protocol, vapors from the highest concentration wells contaminated the adjacent VC and appeared to affect some lower concentration wells (i.e., the wells exhibited unexpectedly reduced levels of NRU). An example dose-response curve is shown in **Figure 2-4**. The tests for which such contamination was present failed the VC criterion. When lower concentrations were used to avoid contaminating the VC adjacent to the highest concentration, toxicity was inadequate to produce an IC<sub>50</sub>. To address this problem, IIVS repeated their tests using film plate sealers, which isolated all wells from each other, and obtained acceptable results. Based on these data, the SMT recommended the use of film plate sealers to the other laboratories to test 2-propanol.

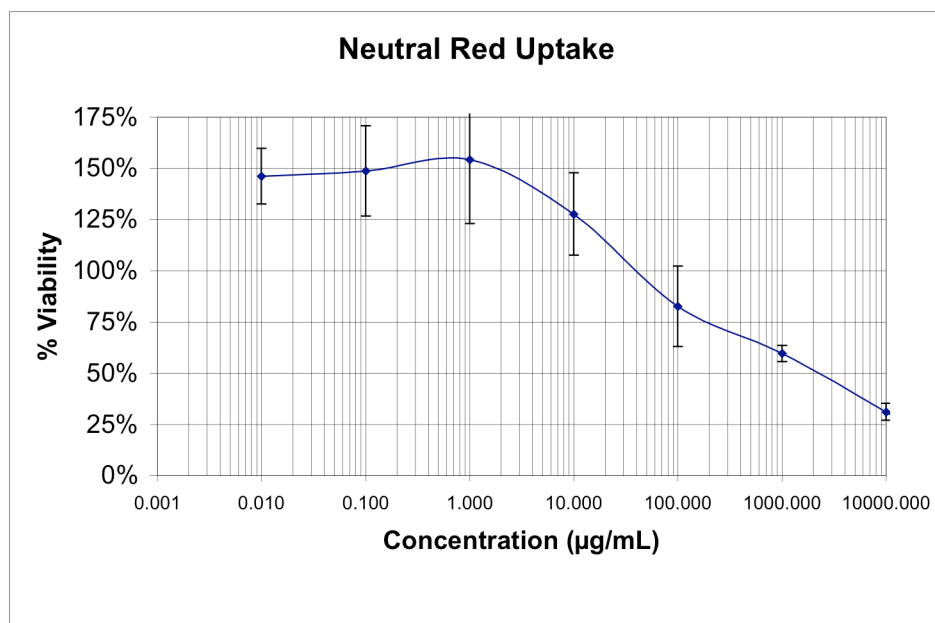
FAL had previous experience using mineral oil as a cell culture cover to keep volatile reference substances from escaping and provided 2-propanol test data where mineral oil had been added to each well. The FAL showed that the average oil vs. film IC<sub>50</sub> values were not

significantly different. However, there was less variability in the film sealer data than the mineral oil data so the SMT decided on the use of plate sealers.

A general indicator of volatility issues in the NRU test methods is the percent difference in the mean OD values for the two VC columns on the test plate. If the difference is greater than 15%, then reference substance volatility is suspected, especially if the VC adjacent to the highest test concentration had a significantly reduced OD value. Volatility may be an issue for reference substances with a specific gravity of less than 1. **Table 5-11** lists the study reference substances that had volatility issues in the NRU test methods.

*Protocol Revision:* The SMT included the use of film sealers to test suspected volatile compounds in the Phase III protocols.

**Figure 2-4 Representative Dose-Response for 2-propanol in a 3T3 Range Finder Test**



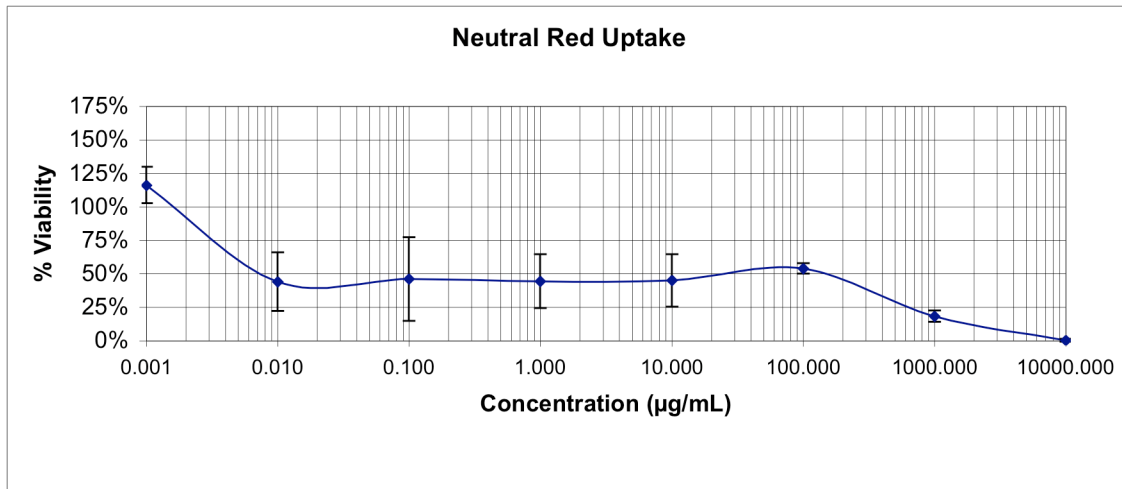
%Difference of the two VC columns from the average VC was 63%. Mean corrected OD for VC1, adjacent to the highest 2-propanol concentration was 0.070, while that for VC2, adjacent to the lowest 2-propanol concentration, was 0.310. The 100% viability of the mean VCs shifted the toxicity curve such that lower concentrations of 2-propanol seem to have viability percentages much greater than the VCs.

### Unusual Dose-Response Curves

Some laboratories observed unusual dose-response curves for aminopterin and colchicine. When the range finder tests produced a biphasic response (see **Figure 2-5** for an example), the SMT advised the laboratories to focus the definitive tests on the lowest concentrations that produced responses around 50% viability. In the definitive tests, they noted that no matter how much reference substance was used, viability was not reduced to 0% (see **Figure 2-6**). This effect with colchicine was very reproducible across laboratories in the NHK NRU test method, but only FAL achieved this type of response with colchicine in the 3T3 NRU test method. Aminopterin produced a similar dose response in the NHK NRU test method at ECBC and FAL, but not at IIVS. In the 3T3 NRU test method, only FAL obtained an unusual response with aminopterin.

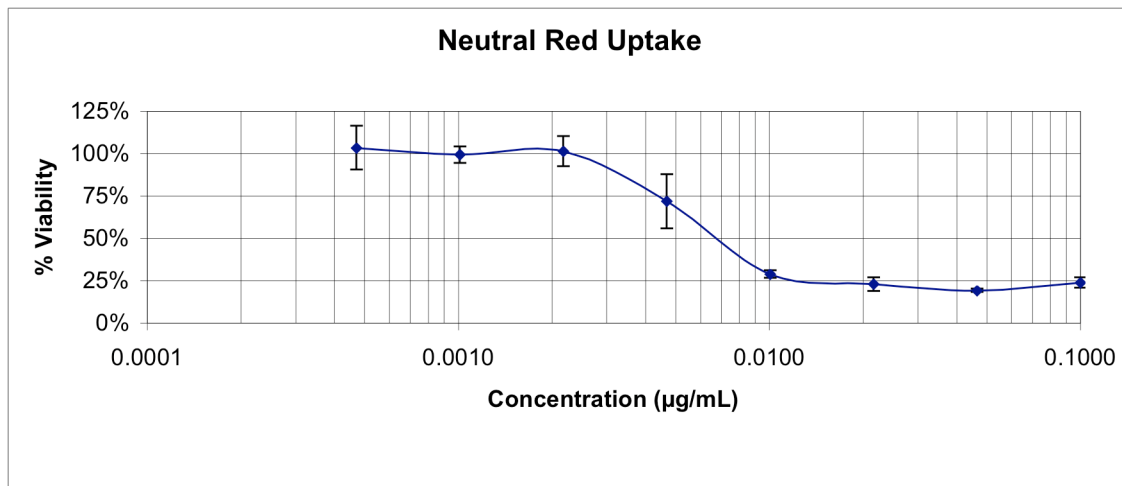
The SMT assumed the unusual dose-responses with these reference substances were due to their mechanisms of action. Colchicine binds to microtubular protein and interferes with function of mitotic spindles, which arrests cell division (NLM 2003). Aminopterin blocks the use of folic acid by the cells, which kills cells during the S phase of the cell cycle by inhibiting metabolism, RNA production, and protein synthesis (NLM 2002). The variability of results among the laboratories may be due to cells in the culture populations being in different cell cycle phases when reference substance was applied to the cultures. Application of reference substance to the cell systems is based on the cells being at a certain monolayer confluency that assures the cells are in exponential growth phase. A subjective visual observation of the cell cultures determines time point 0 for the reference substance exposure period for the NRU test method.

**Figure 2-5 Representative Dose-Response for Aminopterin in a NHK Range Finder Test**



Representative dose-response for aminopterin in a NHK range finder test. Laboratories were instructed to focus definitive tests (concentration-response assays) on the lowest doses that produced 50% viability.

**Figure 2-6 Representative Dose-Response for Aminopterin in a NHK Definitive Test**



Representative dose-response for aminopterin in a NHK definitive test (concentration-response assay). %Viability did not reach 0%.



1136 *Hill Function*

1137 The Hill function used in the previous phases of this study was defined as follows:

1138

$$1139 \quad Y = \text{Bottom} + \frac{\text{Top} - \text{Bottom}}{1 + 10^{(\log \text{IC}_{50} - X) \text{HillSlope}}}$$

1140 where Y= response, X is the logarithm of dose (or concentration), Bottom is the minimum

1141 response, Top is the maximum response, logIC<sub>50</sub> is logarithm of X at the response midway

1142 between Top and Bottom, and HillSlope describes the steepness of the curve.

1143

1144 Since the unusual dose-responses did not fit the Hill function well, R<sup>2</sup> values often failed the

1145 acceptance criterion. To obtain a better model fit, the Bottom parameter was estimated

1146 without constraints (the previous practice was to use Bottom = 0). However, when Bottom ≠

1147 0, the EC<sub>50</sub> reported by the Hill function was not the same as the IC<sub>50</sub> since the Hill function1148 relies on EC<sub>50</sub> defined as the point midway between Top and Bottom. Thus, the Hill function1149 calculation using the Prism<sup>®</sup> software was rearranged to calculate the concentration1150 corresponding to the IC<sub>50</sub> as follows:

$$X = \log EC_{50} - \frac{\log\left(\frac{\text{Top} - \text{Bottom}}{Y - \text{Bottom}} - 1\right)}{\text{HillSlope}}$$

1151

1152 where X is the logarithm of concentration at 50% response, logEC<sub>50</sub> is logarithm of

1153 concentration at the response midway between Top and Bottom, Top is the maximum

1154 response, Bottom is the minimum response, Y = 50 (i.e., 50% response), and HillSlope

1155 describes the steepness of the curve.

1156

1157 IIVS performed the recalculations for their colchicine tests in the NHK NRU test method, but

1158 the SMT performed the necessary recalculations for the other laboratories. Tests that were

1159 recalculated by the SMT are noted in the data summaries.

*Protocol Revision:* The protocol was revised to state that if a range finding test produces a biphasic curve, then the concentrations selected for the subsequent tests should cover the most toxic dose-response range.

#### *Insoluble Reference Substances*

Lithium carbonate was insoluble in 3T3 medium. Only ECBC was able to expose 3T3 cells to sufficient lithium carbonate to produce three tests that passed the test acceptance criteria. Precipitate was reported for two of those tests in the wells at the three highest concentrations. Since the third highest concentration, 510.2 µg/mL, was approximately the IC<sub>50</sub> (average was 564 µg/mL), the true IC<sub>50</sub> for lithium carbonate may actually be lower than that calculated and therefore the LD<sub>50</sub> value would be underestimated. The data were not discarded.

*Protocol Revision for Phase III:* The protocol was revised to allow an increase in the solubility stirring/rocking duration in an incubator from 1 to 3 hours if cytotoxicity in the range finder test was limited by solubility. Also, a **Stopping Rule for Insoluble Chemicals** was added (see **Section 2.5**)

#### *Inadequate Cell Growth in NHK Medium*

IIVS and FAL had several NHK NRU test method assay failures that were attributed to poor cell growth. FAL found that medium/supplement lot combinations that performed poorly in the NHK NRU test method performed well for the laboratory's research on corneal cell cultures. The SMT compiled information from the laboratories on the KBM® and SingleQuot® lot numbers that the laboratories were using along with their assessment of NHK cell growth. The information was distributed to the laboratories to identify the lots that produced adequate growth. The SMT also obtained quality assurance and quality control test results from CAMBREX Clonetics® on the lots of KBM®, but the information provided was inadequate for determining how the medium would perform in the NHK NRU test method.

*Resolution:* A protocol for prequalifying the medium was developed (see **Appendix B-4**). For Phase III, the SMT asked IIVS to prequalify new lots of KBM® and SingleQuots® for use by all laboratories.

*Performance Standards for Media to Support NHK Growth*

A prequalification-of-medium protocol (**Appendix B-4**) was developed and IIVS performed several tests of different lots of medium and supplements to find various combinations that maintained the typical growth characteristics of cells in this study. The laboratories then reserved samples of these acceptable lots at CAMBREX so that the supply of media would not be interrupted due to unavailability of the materials.

*Test Acceptance Criteria for Prequalifying Media*

- $R^2$  (coefficient of determination) value calculated for the Hill model fit (i.e., from PRISM<sup>®</sup> software) is  $\geq 0.85$
- Difference between the mean of all VCs and (a) the left mean VC, and (b) the right mean VC is  $\leq 15\%$
- At least one point  $> 0\%$  and  $\leq 50.0\%$  viability and at least one point  $> 50.0\%$  and  $< 100\%$  viability
- After meeting all other acceptability criteria, the SLS  $IC_{50}$  must be within the historical range established by the laboratory (i.e., mean SLS  $IC_{50} \pm 2.5$  standard deviations)

*Other Criteria for Prequalifying Media (for consideration by a Study Director)*

- General culture observations: rate of proliferation; percent confluence; number of mitotic figures per field; colony formation; distribution of cells; absence or presence of contamination
- Cell morphology observations should include overall appearance (e.g., good, fair, poor), and presence of abnormal cells
- Mean corrected  $OD_{540-550}$  of the VCs
- Cell morphology and confluence of the VCs at the end of the 48-hour treatment.
- Cell doubling time (determined by the laboratory for first time use of the NRU test method [prior to testing with SLS])

*Test Acceptance Criteria for Phase II*

- IC<sub>50</sub> for SLS (PC) is within 2.5 SDs of the historical mean established by the Test Facility (*Phases Ia and Ib*)
- Mean OD values of the left and right VCs (columns 2 and 11 in the 96-well test plate) do not differ by more than 15.0 % from the mean of all VC OD values (*change in decimal point only*)
- At least one calculated cytotoxicity value  $\geq 10.0$  % and  $\leq 50.0$  % viability and at least one calculated cytotoxicity value  $\geq 50.1$  % and  $\leq 90.0$  % viability (*change in decimal point only*)
- $R^2 \geq 0.90$ . Test fails if  $R^2 < 0.80$ . If the  $R^2 \geq 0.80$  and  $< 0.90$ , the SMT evaluates the model fit (note: this determination is made by the Study Director in non-validation studies)

#### 2.6.4 Phase III: Laboratory Testing Phase

The changes below were made in the Phase III protocols as a result of the experience in Phase II.

##### *Cytotoxicity Values Around the IC<sub>50</sub>*

Obtaining at least one calculated cytotoxicity value  $> 0$  % and  $\leq 50.0$  % viability and at least one calculated cytotoxicity value  $> 50.0$  % and  $< 100$  % viability may be difficult or unattainable for reference substances with a steep dose response.

*Protocol Revision:* The test acceptance criterion was qualified so that tests with only one point between 0 and 100 % were acceptable if the smallest practical dilution factor (i.e., 1.21) was used **and** all other test acceptance criteria were met.

##### *Data Analysis Revisions*

*Protocol Revision:* If the lowest toxic concentration calculates to be less than 0%, then the bottom values for IC calculations are set at zero (0) for the Hill function analysis.

*Protocol Revision:* If a biphasic toxicity curve was obtained, the IC<sub>80</sub> and IC<sub>50</sub> were calculated from the initial toxicity part of the curve (the IC<sub>20</sub> was not determined).

*Protocol Revision:* The requirement for test articles to fit the Hill equation with  $R^2 \geq 0.90$  was rescinded. The Hill equation was used to characterize the reference substance response curve shape rather than establish acceptance criterion. The PC acceptance criterion was modified to  $R^2 \geq 0.85$ .

## **2.7 Differences in 3T3 and NHK NRU Test Method Protocols and the *Guidance Document* Standard Protocols**

### **2.7.1 Optimization of the *Guidance Document* Protocols Prior to Initiation of the Study**

As the NICEATM/ECVAM validation study progressed through Phases I and II, the protocols provided in the *Guidance Document* (ICCVAM 2001b) were optimized to address problems that were encountered. Changes to the *Guidance Document* protocols are described below.

- 3T3 cell seeding density for 96-well plates was increased from  $1 \times 10^4$  cells/well to  $2.0 - 3.0 \times 10^4$  cells/well to achieve adequate cell growth.
- The calcium concentration in NHK medium was changed from 0.15 mM to 0.10 mM. The test laboratories had expressed concern that cell differentiation would occur at the higher concentration and requested a lower concentration. CAMBREX Clonetics<sup>®</sup>, the supplier of the NHK cells and NHK medium used in this study, normally grows NHK cells in 0.15 mM calcium without differentiation issues. The supplier agreed that the cells would grow well at 0.10 mM but should not be cultured at concentrations  $< 0.10$  mM in order to avoid morphology and growth changes (CAMBREX technical division, personal communication).
- NHK cells were subcultured once (rather than the three passages suggested in the *Guidance Document*). The laboratories expressed concern about differentiation occurring in the cells if kept in culture too long.
- The highest final concentrations of DMSO and ETOH in the culture media were reduced from 1% to 0.5%. IIVS performed experiments with both cell types to determine the appropriate solvent concentration to avoid toxicity. 3T3 cells

were tested with ETOH at 0.5, 1, and 2% concentrations and DMSO at 0.1, 0.2, 0.3, 0.4, 0.5, 1, and 2% concentrations. The 0.5% concentrations of both solvents were chosen as optimal since that concentration of ETOH produced no toxicity. Although 0.5% DMSO produced slight toxicity (i.e., cells were 91% viable as compared to the control cells – See **Appendix E**), it was chosen by the SMT and laboratories as an acceptable trade off between slight toxicity and the ability to reference substances at higher doses and was used throughout the study (see Curren et al. 2003). However, ETOH was not used as a solvent in the NICEATM/ECVAM validation study.

- The pH of reference substance solutions was not adjusted with NaOH or HCl regardless if solutions became acidic or basic (optimum mammalian cell culture pH is ~ 7.4 [Freshney, 2000]) since some of the basal cytotoxicity produced by these reference substances may be due to pH extremes. See **Appendix F** for pH values of reference substances in culture medium.
- The CO<sub>2</sub> concentration in the incubator was reduced from 7.5% (*Guidance Document*) to 5.0% since the laboratories were already set up to use 5% CO<sub>2</sub> (a typical optimum CO<sub>2</sub> concentration for mammalian cell culture).
- Washing and fixing the cells with a formaldehyde solution prior to NR elution from the cells was eliminated. FAL's regulatory waste disposal requirements concerning formaldehyde were an issue and the NR desorb solution (1% glacial acetic acid, 50% ETOH, 49% H<sub>2</sub>O) adequately fixed the cells to the test plate (INVITTOX 1991). The SMT and laboratories agreed that the use of formaldehyde was unnecessary.
- Reference substance exposure time for 3T3 cells was extended from 24 hours (*Guidance Document*) to 48 hours (see **Section 2.2.6** and **Appendix E**).
- Cell culture seeding densities for subculture were provided as guidelines and the laboratories were given liberty to determine adequate cell densities (see **Table 2-4**).

**Table 2-4 Cell Culture Seeding Densities**

Protocol	3T3 cells/cm <sup>2</sup> subculture to flasks	3T3 cells/well 96-well Plate	NHK cells/cm <sup>2</sup> subculture to flasks	NHK cells/well 96-well Plate
<i>Guidance Document</i>	1.25x10 <sup>4</sup>	2.5x10 <sup>3</sup>	3.5x10 <sup>3</sup>	2 – 2.5x10 <sup>3</sup>
Phase Ia	0.42 – 1.68x10 <sup>4</sup>	2.5x10 <sup>3</sup>	2.5 – 9x10 <sup>3</sup>	2 – 2.5x10 <sup>3</sup>
Phase Ib	0.42 – 1.68x10 <sup>4</sup>	2.5x10 <sup>3</sup>	2.5 – 9x10 <sup>3</sup>	2 – 2.5x10 <sup>3</sup>
Phase II	0.42 – 1.68x10 <sup>4</sup>	2 – 3x10 <sup>3</sup>	2.5 – 9x10 <sup>3</sup>	2 – 2.5x10 <sup>3</sup>
Phase III	0.42 – 1.68x10 <sup>4</sup>	2 – 3x10 <sup>3</sup>	2.5 – 9x10 <sup>3</sup>	2 – 2.5x10 <sup>3</sup>

### 2.7.2 Optimization of the *Guidance Document* Protocols During the Study

#### *Changes in Phase Ia*

- To avoid precipitation of serum components, reference substances were dissolved in treatment medium without NCS for the 3T3 NRU test method (*Guidance Document* recommended 10% NCS). The final 5% NCS on cells in the test plate came from the 50:50 dilution of the treatment medium with the 10% NCS in the routine culture medium (see **Section 2.6.1 – Precipitate Formation**).
- The volume of NHK medium was reduced from 250 µL per well to 125 µL well for cell seeding. Culture medium was not removed prior to reference substance application. Cell death occurred during the refeeding step (see **Section 2.6.1 – Cell Growth**).
- To avoid NR crystal formation, NR dye concentrations were reduced from 50 µg/mL to 33 µg/mL (3T3) and 25 µg/mL (NHK) (see **Section 2.6.1 – NR Dye Crystals**).
- The PC test acceptance criterion for the IC<sub>50</sub> was changed for 3T3 and NHK cells to historical mean ± 2.5 standard deviations instead of within the recommended 95% confidence interval of historical mean for 3T3 cells and 2 standard deviations for NHK cells.
- The test acceptance criterion for the mean OD<sub>540</sub> (> 0.3) of the VC was eliminated. The study protocols provided an OD<sub>540</sub> range as a guideline (see **Table 2-1** and **Section 2.2.9**).

#### *Changes in Phase Ib*

- NHK cells were deemed ready for reference substance application when they reached 20+% confluency rather than the range of 30 – 50% confluency. Laboratory experience in Phase Ia dictated this change.
- A recommendation for obtaining three cytotoxicity points between 10 and 90% inhibition of NRU for use as a quality check of the dose responses was changed to become a test acceptance criterion. The dose response curve had to have at least one calculated cytotoxicity value  $\geq 10.0\%$  and  $\leq 50.0\%$  viability and at least one calculated cytotoxicity value  $\geq 50.1\%$  and  $\leq 90.0\%$  viability (see **Section 2.6.2 – Test Acceptance Criteria**).
- Instructions for using plate sealers were added to the protocols for testing volatile reference substances (see **Section 2.6.3 – Testing Volatile Reference Substances**).

## **2.8 Overview of the Solubility Protocol**

The SMT, with assistance from the laboratories, developed a solubility protocol to provide information to the laboratories to optimize the determination of the most appropriate solvent to use among three solvents: culture medium, DMSO, and ETOH. Each laboratory tested the solubility of each reference substance using this protocol and provided the data to the SMT prior to initiating the cytotoxicity testing of each reference substance. The SMT analyzed the solubility data provided by BioReliance and each testing laboratory, then assigned the solvents for each test article for this study. This eliminated potential variability in the NRU test methods that may have been produced if different solvents had been used for testing the same substance between laboratories.

The solubility protocol is based on an EPA guideline (EPA 1998) that involves testing for solubility in a particular solvent, beginning at a relatively high concentration and proceeding to successively lower concentrations by adding more solvent as necessary for dissolution. Testing stops when, upon visual observation, the procedure produces a clear solution with no cloudiness or precipitate. The solubility protocol used by the *in vitro* laboratories during Phase III required testing reference substances in the various solvents at equivalent reference



substance concentrations applied to the cultures. The solubility flow chart in **Figure 2-7** shows, for example, that 2 mg/mL medium and 200 mg/mL DMSO or ETOH were equivalent concentrations since they yielded 1 mg/mL in cell culture. When applied to cultures, medium was diluted by one-half. The 0.5% [v/v] final concentrations were achieved by diluting DMSO and ETOH by 200. At each concentration, the following mixing procedures were employed, as necessary, to completely dissolve the reference substance in this order: vortex (1–2 minutes); sonication (up to 5 minutes); warming to 37°C (5 – 60 minutes [NRU protocols allow warming to be extended to three hours if cytotoxicity in the range finder test was limited by solubility]). If the reference substance was still undissolved, the next concentration/solvent was tested.

**Figure 2-7 Flow Chart for Determination of Reference Substance Solubility in Medium, DMSO, or ETOH**

Tier	1		2		3		4		5
Concentration in 3T3 and NHK Media	<b>Start Here</b> 20 mg/mL	Incomplete solubility →	2 mg/mL		0.20 mg/mL				
			↓ Incomplete solubility		↓ Incomplete solubility				
Concentration in DMSO			200 mg/mL		20 mg/mL		2 mg/mL		0.2 mg/mL
			↓ Incomplete solubility		↓ Incomplete solubility		↓ Incomplete solubility		↓ Incomplete solubility
Concentration in Ethanol			200 mg/mL	Incomplete solubility →	20 mg/mL	Incomplete solubility →	2 mg/mL	Incomplete solubility →	0.2 mg/mL
									<b>End</b>
Concentration on Cells	10 mg/mL		1 mg/mL		0.1 mg/mL		0.01 mg/mL		0.001 mg/mL

Notes: 3T3 Medium - DMEM (Dulbecco's Modification of Eagle's Medium) with supplements; NHK medium - KBM® (Keratinocyte Basal Medium) with supplements (from CAMBREX Clonetics®).

## 2.9 Components of the Solubility Protocol

### 2.9.1 Medium, Supplies, and Equipment Required

#### *Medium and Chemical Supplies*

- 3T3 Cell Medium: DMEM without L-Glutamine and containing Hanks' salts and high glucose [4.5gm/l]; L-Glutamine 200 mM; NCS
- NHK Cell Medium: Keratinocyte Basal Medium without  $\text{Ca}^{++}$  (KBM<sup>®</sup>, Clonetics<sup>®</sup> CC-3104); KBM<sup>®</sup> SingleQuots<sup>®</sup> medium supplements (Clonetics<sup>®</sup> CC-4131) -- epidermal growth factor, insulin, hydrocortisone, antimicrobial agents, bovine pituitary extract; Calcium SingleQuots<sup>®</sup> (Clonetics<sup>®</sup> CC-4202); penicillin/streptomycin solution
- U.S.P. analytical grade DMSO
- U.S.P. analytical grade (100%, non-denatured) ETOH

#### *Equipment*

- waterbath (37°C)
- sonication unit
- vortex unit
- pipettors (micropipettors)
- balance
- pH meter

#### *Procedures*

The first Phase III solubility protocol procedure was the dissolving of ~10 mg of a reference substance in ~ 0.5 mL medium (both 3T3 and NHK media were tested) for a concentration of 20 mg/mL (see **Appendices B-1 and B-2**). In order, the mixture was vortexed for 1-2 minutes, sonicated for up to 5 minutes, and warmed to 37°C for 5-60 minutes as necessary to dissolve the reference substance. The endpoint for dissolution was that a clear, not cloudy solution with no noticeable precipitate. If the reference substance was not soluble in medium at 20 mg/mL, then more medium was added to a concentration of 2 mg/mL (i.e., a total volume of ~5 mL) (Step 2). The mixing procedures were repeated as necessary to dissolve

the reference substance. If the reference substance was not dissolved, ~10 mg reference substance in ~0.5 mL DMSO was added in an attempt to dissolve it at 200 mg/mL DMSO (Step 3). If the reference substance was not dissolved, the same concentration was attempted in ETOH (Step 4). Step 5 began in the same way with 0.2 mg/mL medium and then to 20 mg/mL DMSO and then 20 mg/mL ETOH.

Determination of solubility of reference substances was limited to visual observation of the reference substance in solution. If a solution appeared clear, then solubility testing ceased. If particles were visible or the solution appeared cloudy, then more stringent mixing procedures were employed. If necessary, the solubility procedure proceeded to the next solvent/concentration tier. The duration of the solubility test was dependent on mechanical procedures used to achieve solubility. Some reference substances were immediately solubilized (e.g., liquids) and others required up to 60 minutes of heating and other mechanical procedures.

#### 2.9.2 Data Collection

All laboratories (including the reference substance distribution laboratory [BioReliance]) used a worksheet designed to capture the solubility information for the reference substances. The protocol's tiered approach to determining solubility of each reference substance was followed. The endpoint for each step was a visual observation of the solution and a documented comment of soluble or insoluble. Each worksheet contained:

- reference substance code and physical description
- solvent (3T3 medium, NHK medium, DMSO, ETOH)
- amount of reference substance (mg)
- volume of solvent added and total volume (mL)
- concentration (µg/mL)
- pH and solvent color
- mechanical procedures (vortexing, sonication, heating)
- comments (soluble/insoluble at the particular concentration; visual observations)

The solubility test data from the laboratories were transferred via email to the SMT and stored on the NICEATM server and as hard-copy printouts. Each laboratory also maintained electronic and hard-copy files of the data.

#### 2.9.3 Variability in Solubility Measurement

Solubility analyses were not replicated since within-laboratory results were not expected to vary. Comparison of the laboratory results to determine laboratory concordance for the 72 reference substances (see **Section 4** for results) provided a measure of variability among the laboratories (see **Section 7**).

#### 2.9.4 Solubility and the 3T3 and NHK NRU Test Methods

Reference substance solutions were monitored throughout all aspects of the *in vitro* NRU cytotoxicity test methods and observations were documented. The 2X and 1X solutions for the range finder tests were permitted to contain precipitates. The lowest concentration of reference substance in a 2X solution that contained observable precipitates, particles, globules, or oily droplets was noted in the EXCEL<sup>®</sup> template. After reference substance exposure, all wells of the 96-well test plates were observed microscopically and scored using a visual observation code as per the NRU protocol. The code addressed growth characteristics and the presence or absence of precipitates. The Study Directors made determinations of test acceptance based on the effect that precipitates had on the NRU results.

#### 2.9.5 Methods for Analyzing Solubility Data

During Phase III, the SMT used the solubility data from all the laboratories to determine the solvent that would be used for cytotoxicity testing (see **Section 5** for solubility results and SMT selections). If the solubility of an individual reference substance in 3T3 medium and NHK medium was different, the SMT chose the same solvent for both test methods, rather than choosing one for the 3T3 NRU test method and one for the NHK NRU test method. For example, if solubility in one medium was  $\geq 2$  mg/mL and solubility in the other medium was  $< 2$  mg/mL, and the reference substance was soluble in DMSO at 200 mg/mL, then the SMT selected DMSO as the solvent for cytotoxicity testing. Where possible, the SMT chose a

solvent such that all cytotoxicity laboratories could obtain solubility at some concentration. For example, if a reference substance had low solubility in medium (i.e., 2 mg/mL) at one laboratory and high solubility in DMSO at the other laboratories, the SMT chose DMSO.

Solubilizing enough reference substance to produce cytotoxicity was challenging for relatively insoluble low toxicity reference substances such as lithium carbonate (in the 3T3 NRU test method) but generally was not a problem for toxic reference substances. Some insoluble and highly toxic reference substances were problematic, however, because the amount of powdered reference substance added to solvent was very small, so it was difficult to determine the absence of solute particles in solution (i.e., if the solution was visibly clear). Any undissolved reference substance remaining might have been too little to see. Arsenic trioxide is an example of such a solute.

## **2.10 Basis of the Solubility Protocol**

The solubility protocol used by BioReliance, which tested solubility of the reference substances prior to testing by the *in vitro* laboratories, is provided in **Appendix G**. The protocol is based largely on information from the literature and Internet searches for solubility procedures, the experience of the SMT and IIVS, and the solubility and IC<sub>50</sub> information for the RC chemicals (Halle 2003). The only formal solubility protocol discovered was the EPA Product Properties Test Guideline, OPPTS 830.7840 Water Solubility Column Elution Method; Shake Flask Method (EPA 1998).

### **2.10.1 Initial Solubility Protocol Development**

BioReliance tested reference substances in cell culture media at 2000 mg/mL, 400 mg/mL, and 200 mg/mL, and if not soluble, in DMSO, and then ETOH at the same concentrations (initial protocol). It was apparent that these concentrations were not low enough when the laboratory was unable to achieve solubility for arsenic trioxide. The solubility protocol was revised twice to lower the concentrations tested (see **Table 2-5**). An extra tier of concentrations  $\leq 1$  mg/mL was added for insoluble reference substances. Because of this experience, this solubility protocol for the cytotoxicity laboratories was revised to reduce the

number of steps required (by testing in log units) and to test in tiers in which the reference substance concentrations reflected the same concentrations in cell cultures.

In Phases Ib and II, the SMT used the data from BioReliance to determine the solvent for the *in vitro* laboratories to use for NRU testing. When it became apparent that the laboratories sometimes obtained different results than those reported by BioReliance, the SMT used the cytotoxicity results from all the laboratories to determine the solvents for Phase III reference substances.

**Table 2-5 Comparison of Concentrations Tested in Various Solubility Protocols**

Solubility Protocol Version	Concentrations Tested (mg/mL)					
	Step 1	Step 2	Step 3	Step 4	Step 5	Steps 6-10
BioReliance 1 (4/26/02) and Phase Ia for cytotoxicity laboratories	2,000	400	200			
BioReliance 2 (9/17/02)	200	40	20	10	2	
BioReliance 3 (10/11/02)	200	40	20	10	2	1, 0.5, 0.25, 0.125, 0.05
Phases Ib, II, III for cytotoxicity laboratories	20 Medium	2 Medium 200 DMSO 200 ETOH	0.2 Medium 20 DMSO 20 ETOH	2 DMSO 2 ETOH	0.2 DMSO 0.2 ETOH	

DMSO – dimethyl sulfoxide

ETOH – ethanol

Medium – cell culture medium

The protocol provided a tiered approach for determining the 2X stock concentration for each reference substance, based on the solvent and solubility of the reference substance (see **Figure 2-7**). The solubility protocol was developed to reduce the number of steps for testing (compared to that used by BioReliance) so that solubility testing was less time consuming (see **Appendix B-3**).

#### 2.10.2 Basis for Modification of the Phase II Protocol

All three cytotoxicity laboratories found arsenic trioxide (tested in Phase Ib) less soluble than that reported by BioReliance (0.25 mg/mL in 3T3 medium and 0.05 mg/mL in NHK

medium). Use of the solubility procedures in the protocol did not dissolve arsenic trioxide. IIVS warmed the stock solution (at least 200 µg/mL for 2X) for longer than the protocol specified (i.e., 30-50 min) but still had small, undissolved particles persist in the non-homogeneous stocks (i.e., particles readily fell out of suspension). ECBC obtained a clear solution (highest 2X concentration was 30-50 µg/mL), but found precipitated particles after the solution stood at room temperature. Sonication time was increased to 15-30 min, and heating time to ~ 30 min to get a finer suspension. This procedure achieved a more homogeneous mixture, resulting in better series dilutions and more uniform application of reference substance to the cells. FAL stirred the suspension (~ 20-90 µg/mL) in the CO<sub>2</sub> incubator for 1.5 to 2 hours to get clear medium.

*Protocol Revision for Phase II:* The duration of the solution heating range was increased from 5-20 minutes to 5-60 minutes.

## 2.11 Summary

- The *Guidance Document* NRU protocols were the basis of the NICEATM/ECVAM study protocols. The SMT and laboratories made initial modifications to the protocols prior to implementation of the study. Other protocol modifications were made after commencement of testing and were the result of comments and recommendations from the laboratories and the SMT. The resulting optimized protocols were used in the main testing phase (Phase III) and were the final protocols for the NICEATM/ECVAM study.
- The solubility protocol was developed to provide specific guidance to laboratories to assure that solubility issues could be satisfactorily addressed and reference substances from a specific study set could be adequately prepared and evaluated for *in vitro* cytotoxicity effects.

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### **3.0 REFERENCE SUBSTANCES USED FOR VALIDATION OF THE 3T3 AND NHK NRU TEST METHODS**

This section discusses the rationale for the selection of the 72 reference substances tested to validate the 3T3 and NHK NRU test methods for determining starting doses for rodent acute oral systemic toxicity testing. Information regarding chemical class and physical/chemical characteristics is provided, as is the available information on toxicological characteristics, such as target, organ, extent of metabolism, and mechanism of action, for the 72 reference substances. Such information may be useful for characterizing the performance of the 3T3 and NHK NRU test methods for various chemical types. Chemical supplier and purity information are provided as well as the methods for purchasing, coding, and distributing the substances to the testing laboratories.

#### **3.1 Rationale for the Reference Substances Selected for Testing**

This section describes the procedure used to select the 72 reference substances tested in the NICEATM/ECVAM validation study.

##### **3.1.1 Reference Substance Selection Criteria**

The SMT selected reference substances for testing in 2001 and 2002 using a process based primarily on general recommendations made by Workshop 2000 participants (ICCVAM 2001b). The following criteria were used:

- the toxicities of the reference substances should be evenly distributed across the expected range of LD<sub>50</sub> values (i.e., the GHS classification for acute oral toxicity [UN 2005])
- the reference substances should cover a wide range of structural and use classes, according to the needs of various user communities
- substances with human toxicity data and/or human exposure potential (i.e., substances of interest to society) should be included

**Table 3-1** shows the GHS classification scheme which classifies chemicals into five toxicity categories or an unclassified group based on acute oral LD<sub>50</sub> values (UN 2005).

**Table 3-1 UN GHS<sup>1</sup> Classification Scheme for Acute Oral Toxicity**

Category	LD <sub>50</sub> (mg/kg)
1	LD <sub>50</sub> ≤ 5
2	5 < LD <sub>50</sub> ≤ 50
3	50 < LD <sub>50</sub> ≤ 300
4	300 < LD <sub>50</sub> ≤ 2000
5	2000 < LD <sub>50</sub> ≤ 5000
Unclassified	LD <sub>50</sub> > 5000

<sup>1</sup>Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005)

For the purposes of toxicity classification, the rodent oral LD<sub>50</sub> values for individual reference substances were obtained from readily available toxicological databases. Rat LD<sub>50</sub> values were preferred, but mouse LD<sub>50</sub> values were used (three reference substances) when rat data were unavailable. However, mouse data were not used in the regression analyses (See **Section 6**). The Registry of Cytotoxicity (RC) is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for chemicals with known molecular weights (Halle 1998). The toxicological databases, in order of preference, were:

- the RC, which contains LD<sub>50</sub> values that came largely from the 1983/84 RTECS<sup>®</sup> (Halle et al. 1998)
- the current RTECS<sup>®</sup> (MDL Information Systems 2001, 2002)
- the current Hazardous Substances Data Bank (HSDB; U.S. National Library of Medicine [NLM] 2001, 2002).

To assure that a wide range of structural and use classes were selected, reference substances of interest to the various U.S. regulatory agencies, as determined from chemical lists (personal communication) from the agencies, were included. Chemicals with human toxicity data and/or human exposure potential (i.e., chemicals of interest to society) were chosen by mining publicly available databases (e.g., NTP test database) for potential candidates.

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101 3.1.2 Candidate Reference Substances102 *Sources of Candidate Chemicals*

103 The process of identifying the 72 reference substances started with the compilation of a  
104 database that ultimately contained 116 candidate chemicals. The intent of the SMT was to  
105 compile a database with more than 12 chemicals in each toxicity category that also met the  
106 other criteria, and then to prioritize the chemicals in each category to select the 72 reference  
107 substances to be tested. As recommended by the Workshop 2000 participants (ICCVAM  
108 2001a), the following publicly available databases and other indicated sources were used to  
109 identify candidate chemicals:

- 110 • the MEIC program, which collected human toxicity data and *in vitro* toxicity  
111 data from 61 test methods for the first 50 chemicals (Ekwall et al. 1998)
- 112 • the RC (Halle 1998), which contains a compilation of *in vitro* cytotoxicity and  
113 *in vivo* rodent LD<sub>50</sub> data for 347 chemicals
- 114 • the Toxic Exposure Surveillance System (TESS) (Litovitz et al. 2000), which  
115 compiles reports of toxic human exposures from poison control centers  
116 throughout the United States
- 117 • pesticides recommended for consideration by the EPA Office of Pesticide  
118 Programs (OPP)
- 119 • the *Guidance Document* (ICCVAM 2001b), which reported the NRU results for  
120 11 RC chemicals using protocols similar to those used in the  
121 NICEATM/ECVAM validation study
- 122 • the U.S. NTP test database, which contains information on the toxicity of  
123 chemicals relevant to human exposure (NTP 2002)
- 124 • the EPA High Production Volume (HPV) Challenge Program, which is a  
125 voluntary testing program to provide the public with a complete set of baseline  
126 health and environmental effects data for each chemical that is manufactured  
127 within or imported into the United States at amounts > 1 million pounds/year  
128 (EPA 2000)

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130 *Selection of Candidate Chemicals*

The complete list of candidate chemicals is provided in **Table 3-2**. The left side of **Table 3-2** presents selected chemicals and the right side presents the alternate chemicals. The candidate chemicals are grouped by GHS acute oral toxicity classification. For each candidate chemical, the table provides the corresponding rat or mouse oral LD<sub>50</sub> value, the database(s) or other source(s) used to identify the chemical as a potential candidate, and the type of product and/or use for the chemical. Product/use categories were identified from HSDB (NLM 2001, 2002) or RTECS® (MDL Information Systems 2001, 2002).

The final list of candidate chemicals compiled by the SMT included:

- 65 MEIC chemicals. These include the first 50 chemicals evaluated by MEIC as well as another 15 chemicals that were identified for future evaluation (C. Clemedson, personal communication 2001). Twenty of these chemicals were identified for the EDIT program, a follow-on project to the MEIC study to develop supplementary toxicity and kinetic tests (to [determine distribution of chemicals in the body and biotransformation of chemicals to more toxic metabolites](#)) to improve the prediction of human toxicity by the battery of tests identified as the best predictors in the MEIC program (Clemedson et al. 2002). The EDIT chemicals were selected by excluding MEIC chemicals that were volatile, those that precipitated at the IC<sub>50</sub> dose level, and those with sparse or insufficient data on human toxicity or mechanism of acute toxicity
- 16 pesticides with extensive human exposure nominated by the EPA OPP. These included fenpropathrin, endosulfan, bromoxynil (phenol), fipronil, carbaryl, rotenone, metaldehyde, molinate, 1,3-dichloropropene, dichlorvos, chlorpyrifos, sodium arsenite, triphenyltin hydroxide, cycloheximide, acrolein, and boric acid. Pentachlorophenol was also nominated, but was already on the candidate list since it was a MEIC chemical

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**Table 3-2 Candidate Chemicals for the 3T3 and NHK NRU Test Methods Validation Study**

Selected Chemicals				Alternate Chemicals				
GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Product/Use <sup>4</sup>	GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Notes <sup>5</sup>	Product/Use <sup>4</sup>
<b><i>LD<sub>50</sub> ≤ 5 mg/kg</i></b>								
Mercury II chloride	1	MEIC, EDIT, RC (outlier), TESS, NTP	Preservative/manufacturing/insecticide	Aflatoxin B1	5.0	RC (outlier)	Prohibitively expensive	Food contaminant
Triethylenemelamine	1	RC (outlier), NTP	Manufacturing/insect sterilant					
Sodium selenate	2 <sup>a</sup>	TESS, NTP	Feed additive					
Busulfan	2	RC (outlier), NTP	Pharmaceutical (antineoplastic)					
Cycloheximide	2	RC (outlier), NTP	Antibiotic/fungicide					
Disulfoton	2	RC (outlier), EPA, NTP	Pesticide (insecticide)					
Parathion	2	RC (outlier), EPA, NTP	Pesticide (insecticide)					
Strychnine	2 <sup>a</sup>	MEIC, TESS, EPA	Pesticide (rodenticide)					
Aminopterin	3 <sup>b</sup>	RC	Pharmaceutical (antineoplastic); Rodenticide					
Phenylthiourea	3	RC (outlier), NTP	Pesticide (rodenticide)					
Epinephrine bitartrate	4 <sup>b</sup>	RC (outlier), NTP (HCl salt)	Pharmaceutical (adrenergic)					
Physostigmine	5 <sup>a</sup>	EHS	Pharmaceutical (anticholinesterase)					
<b><i>5 &lt; LD<sub>50</sub> ≤ 50 mg/kg</i></b>								
Colchicine	6 <sup>b</sup>	MEIC, RC, TESS, NTP	Pharmaceutical (gout suppressant)	2,4-Dinitrophenol	30	RC (outlier), NTP, HPV		Pesticide (fungicide/insecticide) manufacturing
Potassium cyanide	10	MEIC, EDIT, RC (outlier), TESS	Electroplating	t-Butylamine	44 <sup>a</sup>	EPA, NTP, HPV		Manufacturing

**Table 3-2 Candidate Chemicals for the 3T3 and NHK NRU Test Methods Validation Study**

Selected Chemicals				Alternate Chemicals				
GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Product/Use <sup>4</sup>	GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Notes <sup>5</sup>	Product/Use <sup>4</sup>
Dichlorvos	17 <sup>a</sup>	TESS, EPA, NTP, HPV	Pesticide (insecticide)	Acrolein	46	RC, TESS, EPA, NTP, HPV	Volatile (BP=52°C)	Pesticide (herbicide/rodenticide/algicide), manufacturing
Digoxin	18 <sup>b</sup>	MEIC, EDIT, RC (outlier), TESS	Pharmaceutical (antiarrhythmic)					
Fenpropathrin	18 <sup>a</sup>	EPA	Pesticide (insecticide)					
Endosulfan	18 <sup>a</sup>	TESS, EPA, NTP	Pesticide (insecticide)					
Arsenic III trioxide	20	MEIC, EDIT, RC, TESS, EPA, NTP	Pesticide (insecticide)					
Thallium I sulfate	29 <sup>b</sup>	MEIC, EDIT, RC (outlier), TESS	Pesticide (rodenticide/insecticide)					
Sodium arsenite	41 <sup>a</sup>	TESS, NTP	Pesticide (herbicide, insecticide, fungicide)					
Triphenyltin hydroxide	44	RC, EPA, NTP, HPV	Pesticide (fungicide/insecticide)					
Sodium dichromate dihydrate	50	RC, EPA, GD, NTP	Oxidizing agent					
Nicotine	50	MEIC, EDIT, RC (outlier), TESS, EPA, NTP	Pharmaceutical (stimulant)					
<b>50 &lt; LD<sub>50</sub> ≤ 300 mg/kg</b>								
Paraquat	58	MEIC, EDIT, RC (outlier), TESS, EPA	Pesticide (herbicide)	Pentachlorophenol	51	MEIC, RC (outlier), NTP		Disinfectant
Hexachlorophene	61	MEIC, RC, TESS, NTP	Disinfectant	Amphetamine sulfate	55	MEIC, EDIT, RC (outlier), TESS, NTP	DEA	Pharmaceutical (stimulant)
Lindane	76	MEIC, EDIT, RC (outlier), EPA, NTP	Pesticide (insecticide)	Rotenone	60	RC, TESS, EPA, NTP		Pesticide (insecticide/piscicide)



**Table 3-2 Candidate Chemicals for the 3T3 and NHK NRU Test Methods Validation Study**

Selected Chemicals				Alternate Chemicals				
GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Product/Use <sup>4</sup>	GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Notes <sup>5</sup>	Product/Use <sup>4</sup>
Cadmium II chloride	88	RC, TESS, GD, NTP	Consumer/ industrial products	Furfural	65 <sup>a</sup>	NTP, HPV		Solvent, food additive
Verapamil HCl	108	MEIC, EDIT, RC (outlier), TESS, NTP	Pharmaceutical (antiarrhythmic)	p-Phenylenediamine	80	RC, GD, NTP, HPV		Dyeing
Haloperidol	128 <sup>a</sup>	MEIC, TESS	Pharmaceutical (antipsychotic)	Chlorpyrifos	82 <sup>a</sup>	TESS, EPA, NTP		Pesticide (insecticide)
Sodium oxalate	155	MEIC, EDIT, RC, TESS, NTP	Paints, cleaners	Dextropropoxyphene HCl	83	MEIC, RC (outlier), TESS		Pharmaceutical (analgesic)
Phenobarbital	163	MEIC, RC (outlier), TESS, NTP	Pharmaceutical (anticonvulsant)	Methadone	86 <sup>a</sup>	MEIC, TESS, NTP	DEA	Pharmaceutical (analgesic)
Sodium I fluoride	180	MEIC, RC, TESS, EPA, NTP	Electroplating, fluoridation	Fipronil	92 <sup>a</sup>	EPA		Pesticide (insecticide)
Caffeine	192	MEIC, RC (outlier), TESS, NTP, HPV	Pharmaceutical (stimulant), food additive	Pentobarbital	125	MEIC, RC, TESS	DEA	Pharmaceutical (sedative)
Diquat dibromide	231	MEIC, RC, TESS	Pesticide (herbicide)	Bromoxynil (phenol)	190 <sup>a</sup>	EPA		Pesticide (herbicide)
Cupric sulfate * 5 H <sub>2</sub> O	300	MEIC, RC, TESS, EPA, NTP	Pesticide (insecticide/ fungicide)	Diphenylhydantoin	199	MEIC, RC, TESS, NTP		Pharmaceutical (anticonvulsant)
				Metaldehyde	227 <sup>a</sup>	TESS, EPA		Pesticide (molluscicide)
				Carbaryl	230	RC, EPA, NTP		Pesticide (insecticide)
<b>300 &lt; LD<sub>50</sub> ≤ 2000 mg/kg</b>								
Amitriptyline HCl	319	MEIC, EDIT, RC, TESS	Pharmaceutical (antidepressant)	Ferrous sulfate	319	MEIC, RC, TESS		Food additive
Phenol	414	MEIC, RC, TESS, EPA, NTP, HPV	Disinfectant	Warfarin	324	MEIC, RC, TESS, EPA		Pharmaceutical (anticoagulant), pesticide
Propranolol HCl	470 <sup>b</sup>	MEIC, RC, TESS, GD	Pharmaceutical (antiarrhythmic)	Disopyramide	333 <sup>a</sup>	MEIC, TESS		Pharmaceutical (antiarrhythmic)
Chloral hydrate	479	MEIC, RC, TESS, NTP	Pharmaceutical (sedative)	Barium II nitrate	355	MEIC, RC, TESS, NTP		Pyrotechnic
Glutethimide	600	MEIC, RC,	Pharmaceutical	Thioridazine HCl	358	MEIC, RC, TESS		Pharmaceutical

**Table 3-2 Candidate Chemicals for the 3T3 and NHK NRU Test Methods Validation Study**

Selected Chemicals				Alternate Chemicals				
GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Product/Use <sup>4</sup>	GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Notes <sup>5</sup>	Product/Use <sup>4</sup>
		TESS	(sedative)					(antipsychotic)
Atropine sulfate	623	MEIC, EDIT, RC, TESS	Pharmaceutical (antimuscarinic)	Methylphenidate	367 <sup>a</sup>	NTP	DEA	Pharmaceutical (stimulant)
Valproic acid	1695 <sup>b</sup>	RC, MEIC, TESS, NTP	Pharmaceutical (anticonvulsant)	Molinate	369 <sup>a</sup>	EPA, NTP		Pesticide (herbicide)
Meprobamate	794 <sup>a</sup>	MEIC, TESS	Pharmaceutical (antidepressant)	2,4-Dichlorophenoxy-acetic acid	369	MEIC, RC, TESS, EPA, NTP, HPV		Pesticide (herbicide)
Acetylsalicylic acid	1000	MEIC, EDIT, RC, TESS, NTP	Pharmaceutical (analgesic)	Orphenadrine HCl	425	MEIC, RC, NTP		Pharmaceutical (analgesic)
Lithium I sulfate	1187 <sup>b</sup>	MEIC, RC, TESS, NTP (Cl salt)	Pharmaceutical (mood stabilizer)	Trichlorfon	451	RC, EPA, GD, NTP		Pesticide (insecticide)
Procainamide	1950 <sup>a</sup>	MEIC, TESS	Pharmaceutical (antiarrhythmic)	Quinidine sulfate	456	MEIC, RC, NTP (base)		Pharmaceutical (antiarrhythmic)
Carbamazepine	1957 <sup>a</sup>	MEIC, TESS	Pharmaceutical (antiepileptic)	1,3-Dichloropropene	470 <sup>a</sup>	TESS, EPA, NTP		Pesticide (nematocide)
				Theophylline	600 <sup>b</sup>	MEIC, RC, TESS, NTP		Pharmaceutical (antiasthmatic)
				Isoniazid	650	MEIC, RC, TESS, NTP		Pharmaceutical (antibiotic)
				Diazepam	709	MEIC, EDIT, RC, TESS, NTP	DEA	Pharmaceutical (anxiolytic)
				Maprotiline	760 <sup>a</sup>	MEIC, TESS		Pharmaceutical (antidepressant)
				Methyleugenol	810 <sup>a</sup>	NTP		Food additive
				Diphenhydramine HCl	855	MEIC, RC, TESS, NTP		Pharmaceutical (antihistamine)
				Malathion	885	MEIC, EDIT, RC, TESS, EPA, NTP		Pesticide (insecticide)
				Salicylic acid	891	RC, TESS, GD, NTP, HPV		Pharmaceutical (analgesic)
				Chloroform	908	MEIC, RC, NTP, HPV	Volatile (BP=61°C)	Solvent
				Chloroquine diphosphate	970	MEIC, RC		Pharmaceutical (antimalarial)

**Table 3-2 Candidate Chemicals for the 3T3 and NHK NRU Test Methods Validation Study**

Selected Chemicals				Alternate Chemicals				
GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Product/Use <sup>4</sup>	GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Notes <sup>5</sup>	Product/Use <sup>4</sup>
				Ibuprofen	1009	RC, TESS, GD		Pharmaceutical (analgesic)
				Nalidixic acid	1349	RC, GD, NTP		Pharmaceutical (antibiotic)
				Dichloromethane	1597	MEIC, RC, TESS, NTP, HPV	Volatile (BP=40°C)	Solvent
				Antipyrine	1800	RC, GD		Pharmaceutical (analgesic)
<b>2000 &lt; LD<sub>50</sub> ≤ 5000 mg/kg</b>								
Acetaminophen	2404	MEIC, EDIT, RC, TESS, NTP	Pharmaceutical (analgesic)					
Potassium I chloride	2602	MEIC, RC, TESS, NTP	Pharmaceutical (electrolyte), manufacturing					
Boric acid	2660 <sup>a</sup>	TESS, EPA, NTP	Pesticide (insecticide)					
Carbon tetrachloride	2799	MEIC, RC, TESS, NTP, HPV	Solvent					
Dimethylformamide	2800	RC, GD, NTP, HPV	Solvent					
Sodium chloride	2998	MEIC, EDIT, RC, TESS, EPA, NTP	Pharmaceutical (electrolyte), food additive					
Citric Acid	3000 <sup>a</sup>	EPA, NTP, HPV	Food additive					
Chloramphenicol	3393	MEIC, RC, NTP	Pharmaceutical (antibiotic)					
Lactic acid	3730	RC, NTP, HPV	Food additive					
Acetonitrile	3798	RC, NTP, HPV	Solvent					
Xylene	4300	MEIC, RC, TESS, NTP, HPV	Solvent					
Trichloroacetic acid	4999	RC, NTP	Fixative					
<b>LD<sub>50</sub> &gt; 5000 mg/kg</b>								

**Table 3-2 Candidate Chemicals for the 3T3 and NHK NRU Test Methods Validation Study**

Selected Chemicals				Alternate Chemicals				
GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Product/Use <sup>4</sup>	GHS Category <sup>1</sup> /Chemical	Rodent Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	Source <sup>3</sup>	Notes <sup>5</sup>	Product/Use <sup>4</sup>
2-Propanol	5843	MEIC, RC, TESS, EPA, NTP, HPV	Disinfectant					
Gibberellic acid	6305	RC, EPA, NTP	Plant growth regulator					
Propylparaben	6326 <sup>b</sup>	RC (outlier), NTP	Food additive					
5-Aminosalicylic acid	7749 <sup>b</sup>	RC (outlier), NTP	Pharmaceutical (antibiotic)					
Ethylene glycol	8567	MEIC, EDIT, RC, TESS, NTP, HPV	Antifreeze					
Diethyl phthalate	8602	RC (outlier), NTP, HPV	Plasticizer					
Sodium hypochlorite	8910 <sup>d</sup>	TESS, NTP	Disinfectant					
1,1,1-Trichloroethane	10298	MEIC, RC, NTP, HPV	Solvent					
Dibutyl phthalate	11998	RC (outlier), NTP, HPV	Plasticizer					
Glycerol	12691	RC, GD, NTP, HPV	Solvent					
Methanol	13012	MEIC, EDIT, RC, TESS, NTP, HPV	Solvent					
Ethanol	14008	MEIC, RC (outlier), TESS, EPA, NTP, HPV	Solvent					

<sup>1</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals for acute oral toxicity (UN 2005).

<sup>2</sup>LD<sub>50</sub> data are from the Registry of Cytotoxicity (Halle 1998) and are for rats, the preferred species for oral acute toxicity studies, unless otherwise noted. Data with decimal places are rounded to the nearest one.

<sup>3</sup>Sources used to identify candidate chemicals: EDIT = Evaluation-guided Development of New *In vitro* Test Batteries; EPA = pesticides registered with the Environmental Protection Agency; EHS = EPA's Extremely Hazardous Substance list; HPV = High Production Volume chemicals (i.e., those that are imported into or produced in the United States in amounts ≥ 1,000,000 lbs/year; GD = *Guidance Document* (ICCVAM 2001b); MEIC = Multicentre Evaluation of In Vitro Cytotoxicity; NTP = National Toxicology Program; RC = Registry of Cytotoxicity with chemicals classified as regression outliers shown in parentheses; TESS = Toxic Exposure Surveillance System (Litovitz et al. 2000).

<sup>4</sup>Product/use categories from Hazardous Substances Data Bank (NLM 2002) or Registry of Toxic Effects of Chemical Substances ([RTECS<sup>®</sup>], MDL Information Systems 2002).  
Pharmaceutical uses from Gilman et al. (1985) or Thomson PDR<sup>®</sup> (2004).

<sup>5</sup>Only chemicals expected to be too volatile for the cytotoxicity assay system have "volatile" notations. BP = Boiling point. DEA (U.S. Drug Enforcement Agency) refers to  
Schedule II controlled substances. Chemicals with no "DEA" notation are expected to be under less strict control.

<sup>a</sup>RTECS<sup>®</sup> (MDL Information Systems 2002).

<sup>b</sup>Mouse.

- five chemicals associated with the highest incidence of toxic exposures reported by U.S. poison control centers participating in the TESS (Litovitz et al. 2000): hypochlorite, acetaminophen, ethanol, diphenhydramine, and isopropanol. The five chemicals with the greatest incidence of toxic exposures among children were the same, except that oxalate replaced ethanol. Most of these chemicals were already identified as candidate chemicals due to their inclusion in the MEIC study. Since hypochlorite (sodium salt) and diphenhydramine, were not already included, they were added to the list of candidates
- 11 chemicals recommended in the *Guidance Document* (ICCVAM 2001b) for qualifying *in vitro* cytotoxicity assays for the prediction of starting doses using the RC regression. These chemicals were recommended because the IC<sub>50</sub> and LD<sub>50</sub> data for these chemicals fit the RC regression line extremely well. These chemicals were sodium dichromate dihydrate, cadmium chloride, p-phenylenediamine, DL-propranolol HCl, trichlorfon, ibuprofen, nalidixic acid, salicylic acid, antipyrine, dimethylformamide, and glycerol
- 16 chemicals from the NTP
  - furfural, methyleugenol, and methylphenidate, scheduled for testing by the NTP National Center for Toxicogenomics (NCT) (G. Boorman, personal communication 2001), were added. Acetaminophen, another hepatotoxin to be tested by the NCT, was already a candidate chemical because it was included in the MEIC study. Chromium (VI), recommended by the NTP for consideration due to the potential for human exposure via drinking water (NTP 2002) was represented in the list of candidate chemicals by sodium dichromate dihydrate, which was also recommended in the *Guidance Document* (ICCVAM 2001b)
  - dibutyl phthalate, 5-aminosalicylic acid, propylparaben, gibberellic acid, and diethyl phthalate were added to increase the number of chemicals with LD<sub>50</sub> values > 5000 mg/kg
  - trichloroacetic acid was added to increase the number of chemicals in the 2000 < LD<sub>50</sub> ≤ 5000 mg/kg category

- sodium selenate was added to increase the number of chemicals in the  $LD_{50} \leq 5$  mg/kg category to 12
- six chemicals that were also on the HPV list were added. Lactic acid, citric acid, and acetonitrile were added to increase the number of chemicals in the  $2000 < LD_{50} \leq 5000$  mg/kg category. Tert-butylamine, 2,4-dinitrophenol, and acrolein were added to increase the number of chemicals in the  $5 < LD_{50} \leq 50$  mg/kg category
- eight additional RC chemicals in the  $LD_{50} \leq 5$  mg/kg category. These were: triethylenemelamine, busulfan, disulfoton, parathion, aminopterin, phenylthiourea, epinephrine bitartrate, and aflatoxin B1

The goal to identify more than 12 candidate chemicals for each toxicity category was unrealized for three toxicity categories. The most toxic category ( $LD_{50} \leq 5$  mg/kg), and least toxic categories ( $2000 < LD_{50} \leq 5000$  mg/kg,  $LD_{50} > 5000$  mg/kg), contained only 12 candidate chemicals each. The intermediate toxicity categories ( $50 < LD_{50} \leq 300$  mg/kg,  $300 < LD_{50} \leq 2000$  mg/kg), however, contained two to three times the minimum number of candidate chemicals.

### 3.1.3 Selection of Reference Substances for Testing

Using the candidate chemical database, 72 reference substances (12 unclassified chemicals and 12 chemicals from each the five GHS acute oral toxicity hazard categories) were selected for use in the NICEATM/ECVAM validation study. The criteria for prioritizing the candidate chemicals were:

- the availability of rodent acute oral toxicity data (e.g., RC, RTECS<sup>®</sup>)
- the availability of human acute oral toxicity data and/or relevance for human exposure (e.g., MEIC, EDIT, TESS, NTP)
- the lack of excessive volatility as estimated by SMT chemical consultants.

Since the cells are exposed for 48 hours while incubated at 37°C in 96-well plates, volatilization from wells with high reference substance concentrations would reduce the extent of cytotoxicity and potentially contaminate other wells in close proximity

- the lack of U.S. Drug Enforcement Agency (DEA) controls. Excluding chemicals that are listed in DEA Schedules I and II from consideration obviates the requirement for U.S. laboratories to obtain a DEA license and adhere to strict chemical storage and control procedures
- practical considerations such as cost and disposal issues

If more than twelve candidate chemicals in a GHS category met the above criteria, then selection was based on two further considerations. One consideration was the distribution of chemical toxicities within each toxicity category (i.e., the goal was to select chemicals that represented the entire range of toxicity within each category). Another consideration, which applied only to candidate chemicals selected from the RC database, was the fit of the chemical to the RC regression. Chemicals with the best fit to the RC regression were preferentially selected to prevent the entire set of reference substances from having proportionally more “outlier” substances (i.e., greater than one-half log from the RC regression) than the entire RC database.

The final list of selected reference substances is provided by GHS acute oral toxicity category on the left side of **Table 3-2**.

### **3.2 Rationale for the Number of Reference Substances Selected**

Seventy-two reference substances were used to evaluate the ability of the 3T3 and NHK NRU test methods to estimate the acute oral LD<sub>50</sub> and thus the starting dose for *in vivo* acute oral toxicity tests. The SMT determined the number of reference substances for testing by first using the GHS classification scheme for acute oral toxicity (UN 2005) to assure that the candidate chemicals covered the complete range of toxicity, (see **Table 3-1**) then deciding how many chemicals would be tested per category. To adequately cover the range of toxicity within each of the six toxicity groups, the SMT decided to test 12 chemicals per group. Seventy-two reference substances (12 substances/group with six groups) were deemed adequate by the SMT, the ICCVAM Acute Toxicity Working Group (ATWG), ICCVAM, and ECVAM.



The total number of reference substances was comparable to the number used in other contemporary *in vitro* test method multilaboratory validation studies. The European Cosmetic, Toiletry, and Perfumery Association evaluation of multiple alternatives to the Draize eye irritation test used 55 reference substances (Brantom et al. 1997). ECVAM's evaluations of *in vitro* dermal corrosivity test methods (Fentem et al. 1998) and *in vitro* dermal irritation assays (Botham 2004) used 60 reference substances.

### 3.3 Characteristics of the Selected Reference Substances

The physical/chemical and toxicological information in **Appendix F** may be useful for characterizing the performance of the *in vitro* NRU assays for various chemical types. **Appendix F-1** lists the selected reference substances in alphabetical order with information on the CASRN, purity, supplier, pH, and concentrations tested in the *in vitro* NRU cytotoxicity assays. **Appendix F-2** also provides the reference substances in alphabetical order, but with the available information on molecular weight, chemical class, water solubility, acid/base dissociation constant (pK), boiling point, lipid solubility (log K<sub>ow</sub>), major toxic effects, ability to pass the blood:brain barrier, metabolic activation/inactivation, and mechanism of lethality. The remainder of **Section 3.3** summarizes selected characteristics of the reference substances.

#### 3.3.1 Source Databases Represented by the Selected Reference Substances

The primary sources of chemicals, which reflect the level of societal interest, were well represented in the final list of reference substances. **Table 3-3** shows the distribution of reference substances by GHS category from the MEIC, EDIT, TESS, NTP, and HPV lists. Forty-two (58%) of the 72 selected chemicals were MEIC chemicals (17 of the 42 MEIC chemicals [40%] were EDIT chemicals), 46 (64%) chemicals were involved in human poisonings report by TESS, 51 (71%) chemicals have been evaluated by the NTP, and 18 (25%) chemicals are listed in the EPA's HPV Challenge Program. Some chemicals were found in more than one source.

The other major source of chemicals was the RC. As shown in **Table 3-4**, 58 (81%) of the selected chemicals were included in the RC. Since one of the regression formulas evaluated in the NICEATM/ECVAM validation study was the RC regression, the fit of the RC chemicals to the regression was relevant (Halle 1998). Halle (1998) defined outliers as those chemicals with log IC<sub>50</sub>-log LD<sub>50</sub> points that were > 0.699 (i.e., log 5) from the RC regression. For each toxicity category, **Table 3-4** shows the number of RC outliers selected for testing and the corresponding number of outliers in the RC. Although the percentage of outliers for the selected chemicals in several GHS categories is similar to the RC, the total percentage of RC outliers in the set of reference substances (i.e., 38% [22/58]) is greater than the total percentage of outliers in the RC (i.e., 27% [95/347]). For the reference substances, the RC prediction model underpredicted toxicity (i.e., actual LD<sub>50</sub> is lower than predicted) for 17 outliers and overpredicted toxicity (i.e., actual LD<sub>50</sub> is higher than predicted) for five outliers. **Figure 3-1** shows the 58 RC chemicals selected for testing with the remaining 289 RC data points and the RC regression. In the figure, the outliers are those points outside the RC prediction interval. The 17 outlier chemicals for which toxicity is underpredicted are below the lower prediction interval and the five outliers for which toxicity is overpredicted are above the upper prediction interval.

314 **Table 3-3 Distribution of Candidate Chemicals and Reference Substances by Source<sup>1</sup> and Toxicity Category**

GHS <sup>2</sup> Category (LD <sub>50</sub> in mg/kg)	Reference Substances/ Candidate Chemicals	MEIC Reference/ MEIC Candidates	EDIT Reference/ EDIT Candidates	TESS Reference/ TESS Candidates	NTP Reference/ NTP Candidates	HPV Reference/ HPV Candidates
LD <sub>50</sub> ≤ 5	12/13	2/2	1/1	3/3	5/5	0/0
5 < LD <sub>50</sub> ≤ 50	12/15	6/6	5/5	9/10	8/11	2/5
50 < LD <sub>50</sub> ≤ 300	12/26	11/17	4/5	11/19	9/18	1/3
300 < LD <sub>50</sub> ≤ 2000	12/38	12/29	3/5	12/27	5/23	1/5
2000 < LD <sub>50</sub> ≤ 5000	12/12	6/6	2/2	6/6	12/12	6/6
LD <sub>50</sub> > 5000	12/12	5/5	2/2	5/5	12/12	8/8
Total	72/116	42/65	17/20	46/70	51/81	18/27

<sup>1</sup>Substances may be represented in more than one source (see **Table 3-2**).

<sup>2</sup>GHS = Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005).

MEIC = Multicentre Evaluation of In Vitro Cytotoxicity; EDIT= Evaluation-Guided Development of *In vitro* Tests; TESS =Toxic Exposure Surveillance System; NTP = U.S. National Toxicology Program; HPV = EPA High Production Volume program.

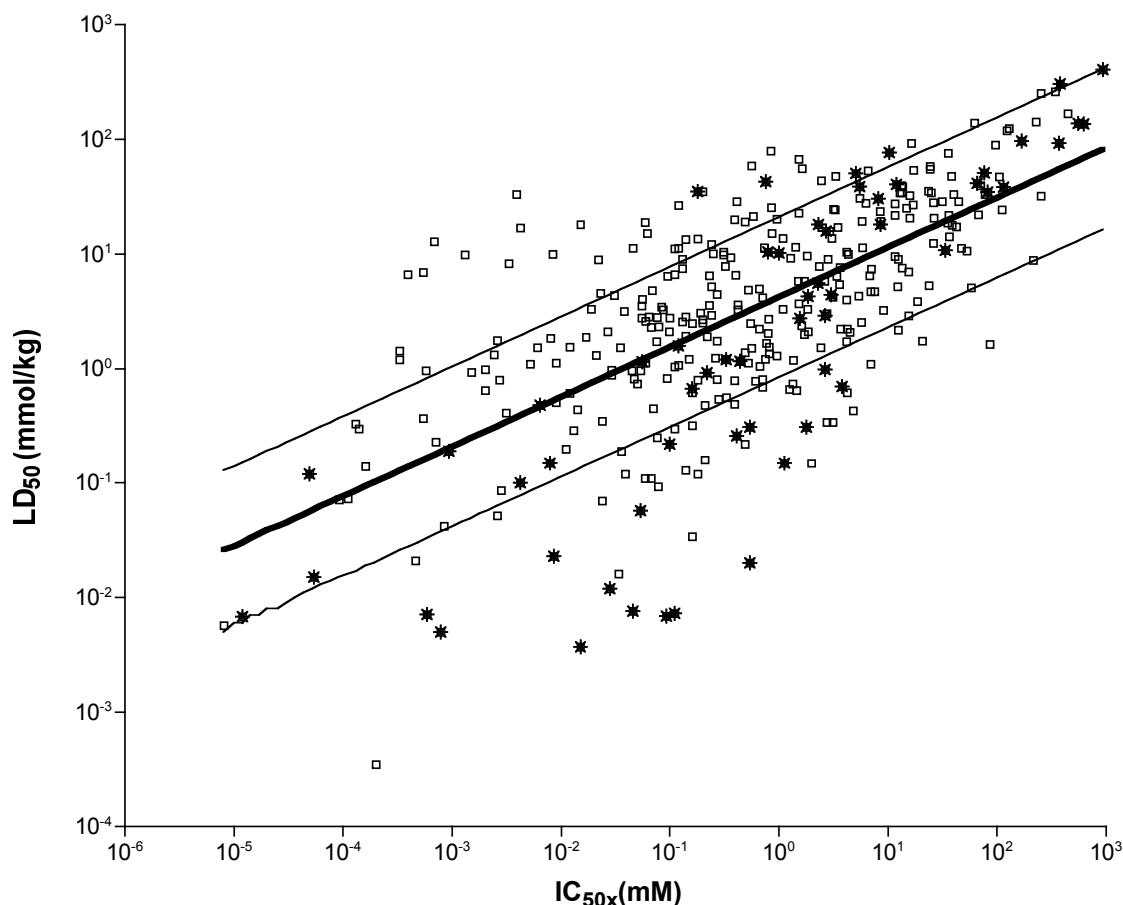
**Table 3-4 Selected Chemicals: Distribution of Registry of Cytotoxicity (RC) Chemicals and RC Outliers<sup>1</sup> by Toxicity Category**

GHS <sup>2</sup> Category (LD <sub>50</sub> in mg/kg)	RC Outliers/ Total Chemicals	Candidate and Selected Chemicals		
		Candidate Chemicals	RC Reference / RC Candidates	RC Reference Outliers/ RC Reference Chemicals
LD <sub>50</sub> ≤ 5	10/11 (91%)	13	9/10	8/9 (89%)
5 < LD <sub>50</sub> ≤ 50	15/26 (58%)	15	8/10	4/8 (50%)
50 < LD <sub>50</sub> ≤ 300	24/70 (34%)	26	11/18	5/11 (45%)
300 < LD <sub>50</sub> ≤ 2000	14/139 (10%)	38	9/29	0/9 (0%)
2000 < LD <sub>50</sub> ≤ 5000	12/57 (21%)	12	10/10	0/10 (0%)
LD <sub>50</sub> > 5000	20/44 (45%)	12	11/11	5/11 (45%)
Total	95/347 (27%)	116	58/88	22/58 (38%)

<sup>1</sup>Chemicals falling outside the log 5 (i.e., > ± 0.699) prediction interval for the RC regression (Halle 1998).

<sup>2</sup>GHS: Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005).

**Figure 3-1 The Fifty-Eight (58) Selected Registry of Cytotoxicity (RC) Chemicals on the RC Regression**



The 58 RC chemicals tested in the NICEATM/ECVAM validation study are shown by \*. The RC regression,  $\log(\text{LD}_{50}) = 0.435 \times \log(\text{IC}_{50x}) + 0.625$ , is shown by the bold line. The lighter lines show the  $\pm \log 5$  (i.e.,  $\pm 0.699$ ) prediction interval (Halle 1998). The remaining 289 RC data points are shown by the open boxes.

### 3.3.2 Chemical Classes Represented by the Selected Reference Substances

Medical subject headings (MeSH) from the NLM were used to determine chemical class for the selected chemicals. Of the 72 reference substances, 55 (76%) were organic compounds and 17 (24%) were inorganic compounds. The most commonly represented classes of organic compounds were heterocyclic compounds (14/55, 26%), carboxylic acids (12/55, 22%), and alcohols (10/55, 18%). **Table 3-5** shows the distribution of the selected chemicals among the GHS toxicity categories. The 14 heterocyclic compounds were rather evenly

distributed among the first four GHS toxicity categories for  $LD_{50} \leq 2000$  mg/kg with the majority of the heterocyclics (11/14) in the categories for  $LD_{50} < 300$  mg/kg. The majority of the carboxylic acids (10/12) and alcohols (8/10) had  $LD_{50} > 300$  mg/kg. The majority of the inorganic compounds (12/17) had  $LD_{50} < 300$  mg/kg.

### 3.3.3 Product/Use Classes Represented by the Selected Reference Substances

Product and use information for the selected chemicals was obtained from HSDB (NLM 2002) or RTECS<sup>®</sup> (MDL Information Systems 2002). Since more than one use was reported for some chemicals, the number of assigned uses (77) is greater than the number of selected chemicals. **Table 3-6** shows the distribution of products and uses of the selected chemicals among the GHS toxicity categories. Pharmaceutical (27/77; 35%) and pesticide (17/77; 22%) uses were observed most frequently. The toxicity category for  $300 < LD_{50} \leq 2000$  mg/kg had the highest number of chemicals with pharmaceutical uses. Every toxicity category except for  $LD_{50} > 5000$  mg/kg had at least four chemicals with pharmaceutical uses. The majority of chemicals (16/17; 94%) with pesticide uses had  $LD_{50} < 300$  mg/kg. The next most frequent uses for the selected chemicals were solvents (8/77; 10%) and food additives (5/77; 6%). The toxicity categories for  $LD_{50} > 2000$  mg/kg contained most of the chemicals with solvent (8/8; 100%) and food additive (4/5; 80%) uses.

### 3.3.4 Toxicological Characteristics of the Selected Reference Substances

#### *Corrosivity*

During the chemical selection process, the intent of the SMT was prioritize chemicals with low corrosivity because guidelines for acute systemic toxicity testing indicate that corrosive or severely irritating chemicals need not be tested (OECD 2001a, c, d). The UN and U.S. Department of Transportation Packing Group (DOT PG) classification system was used to classify the corrosivity hazard associated with the candidate chemicals. However, after chemical selection was completed and testing had begun, the SMT discovered that the PG classification system is also based on hazards other than corrosivity (e.g., dermal and inhalation toxicity, flammability, etc.). Thus, the selected chemicals were not actually prioritized by corrosivity. Subsequent information on the corrosivity of the selected chemicals was obtained from HSDB (NLM 2004) and the Material Safety Data Sheets

374 (MSDS) provided with the purchased reference substances. Seven substances had corrosive  
375 notations. The MSDSs for lactic acid, sodium hypochlorite, sodium oxalate, and  
376 trichloroacetic acid indicated that these chemicals should carry a corrosive label. Chloral  
377 hydrate, mercury II chloride, and potassium cyanide were noted to be corrosive to eyes or  
378 skin by their HSDB files.

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**Table 3-5 Distribution of Chemical Class for the 72 Reference Substances by Toxicity Category**

Chemical Class <sup>2</sup>	GHS Acute Oral Toxicity Category <sup>1</sup> (mg/kg)						Total
	≤ 5	> 5 - ≤ 50	> 50 - ≤ 300	> 300 - ≤ 2000	> 2000 - ≤ 5000	> 5000	
<b>Organic</b>							
Heterocyclic compound	4	3	4	3	0	0	14
Carboxylic acid	1	0	1	3	3	4	12
Alcohol	2	0	0	2	1	5	10
Amide	0	0	0	1	2	0	3
Halogenated hydrocarbon	0	0	1	0	1	1	3
Cyclic hydrocarbon	0	0	1	0	1	0	2
Hydrocarbon	0	1	0	0	0	1	2
Organophosphorous compound	2	1	0	0	0	0	3
Polycyclic compound	0	1	0	1	0	0	2
Amine	0	0	1	0	0	0	1
Nitrile	0	0	0	0	1	0	1
Organometallic compound	0	1	0	0	0	0	1
Phenol	0	0	0	1	0	0	1
Total	9	7	8	11	9	11	55
<b>Inorganic</b>							
Arsenical	0	2	0	0	0	0	2
Sulfur compound	1	0	1	0	0	0	2
Boron compound	0	0	0	0	1	0	1
Cadmium compound	0	0	1	0	0	0	1
Ketone	0	0	1	0	0	0	1
Lithium compound	0	0	0	1	0	0	1
Mercury compound	1	0	0	0	0	0	1
Metal	0	1	0	0	0	0	1



**Table 3-5 Distribution of Chemical Class for the 72 Reference Substances by Toxicity Category**

Chemical Class <sup>2</sup>	GHS Acute Oral Toxicity Category <sup>1</sup> (mg/kg)						Total
	≤ 5	> 5 - ≤ 50	> 50 - ≤ 300	> 300 - ≤ 2000	> 2000 - ≤ 5000	> 5000	
Potassium, chlorine compound	0	0	0	0	1	0	1
Potassium, nitrogen compound	0	1	0	0	0	0	1
Sodium, chlorine compound	0	0	0	0	1	0	1
Sodium, chromium compound	0	1	0	0	0	0	1
Sodium, fluorine compound	0	0	1	0	0	0	1
Sodium, oxygen, chlorine compound	0	0	0	0	0	1	1
Sodium, selenium compound	1	0	0	0	0	0	1
Total	3	5	4	1	3	1	17

<sup>1</sup>GHS: Globally Harmonized System of Classification and Labelling of Chemicals based on oral LD<sub>50</sub> (UN 2005).

≤ 5: LD<sub>50</sub> ≤ 5 mg/kg  
 > 5 - ≤ 50: 5 < LD<sub>50</sub> ≤ 50 mg/kg  
 > 50 - ≤ 300: 50 < LD<sub>50</sub> ≤ 300 mg/kg  
 > 300 - ≤ 2000: 300 < LD<sub>50</sub> ≤ 2000 mg/kg  
 > 2000 - ≤ 5000: 2000 < LD<sub>50</sub> ≤ 5000 mg/kg  
 > 5000: LD<sub>50</sub> > 5000 mg/kg

<sup>2</sup>Based on the Medical Subject Heading [MeSH] index (NLM 2005).

388 **Table 3-6 Distribution of Product/Use<sup>1</sup> Class for the 72 Reference Substances by Toxicity Category**

Product/Use Class <sup>1</sup>	GHS Acute Oral Toxicity Category <sup>2</sup> (mg/kg)						Total
	≤ 5	> 5 - ≤ 50	> 50 - ≤ 300	> 300 - ≤ 2000	> 2000 - ≤ 5000	> 5000	
Antibiotic/fungicide	1	0	0	0	0	0	1
Antifreeze	0	0	0	0	0	1	1
Consumer/industrial products	0	0	1	0	0	0	1
Disinfectant	0	0	1	1	0	2	4
Electroplating	0	2	0	0	0	0	2
Fluoridation	0	0	1	0	0	0	1
Feed additive	1	0	0	0	0	0	1
Fixative	0	0	0	0	1	0	1
Food additive	0	0	1	0	3	1	5
Manufacturing	1	0	0	0	1	0	2
Oxidizing agent	0	1	0	0	0	0	1
Paints, cleaners	0	0	1	0	0	0	1
Pesticide	5	7	4	0	1	0	17
Pharmaceutical	4	3	4	11	4	1	27
Plant growth regulator	0	0	0	0	0	1	1
Plasticizer	0	0	0	0	0	2	2
Preservative	1	0	0	0	0	0	1
Solvent	0	0	0	0	4	4	8

<sup>1</sup>Product/use categories from Hazardous Substances Data Bank (NLM 2002) or Registry of Toxic Effects of Chemical Substances ([RTECS<sup>®</sup>], MDL Information Systems 2002). Some chemicals are counted more than once due to multiple uses.

≤ 5: LD<sub>50</sub> ≤ 5 mg/kg  
 > 5 - ≤ 50: 5 < LD<sub>50</sub> ≤ 50 mg/kg  
 > 50 - ≤ 300: 50 < LD<sub>50</sub> ≤ 300 mg/kg  
 > 300 - ≤ 2000: 300 < LD<sub>50</sub> ≤ 2000 mg/kg  
 > 2000 - ≤ 5000: 2000 < LD<sub>50</sub> ≤ 5000 mg/kg  
 > 5000: LD<sub>50</sub> > 5000 mg/kg

<sup>2</sup>GHS: Globally Harmonized System of Classification and Labelling of Chemicals based on oral LD<sub>50</sub> (UN 2005).

### Toxicity Targets

As shown in **Appendix F**, the most common toxicological effects were neurological (40 reference substances); 26 reference substances cause central nervous system (CNS) depression, seven reference substances produce CNS stimulation, four reference substances produce other CNS affects such as encephalopathy, and three reference substances attack the peripheral nervous system. Other common toxicity targets include the liver (17 reference substances), kidney (15 reference substances), and cardiovascular system (10 reference substances). No target organ information was available for gibberellic acid. Among the 72 reference substances, 27 had multiple toxicity targets.

### Metabolism

**Table 3-7** shows the 22 reference substances that are known or expected to produce active/toxic metabolites *in vivo*. In contrast, dichlorvos, fenprothrin, meprobamate, phenylthiourea, and sodium dichromate are known to be rapidly inactivated by metabolism *in vivo* to less toxic compounds. Because the NHK and 3T3 cells have little (see Babich 1991) or no metabolic capability, respectively, metabolites of these compound would be unavailable *in vitro*. See **Appendix F-2** for more information on the metabolism of the selected chemicals.

**Table 3-7 Reference Substances Metabolized to Active Metabolites**

Known to Have Active Metabolites				Active Metabolites Expected
Acetaminophen	Carbamazepine	Digoxin	Methanol	Carbon tetrachloride
Acetonitrile	Chloral hydrate	Disulfoton	Parathion	Triethylenemelamine
Acetylsalicylic acid	Cycloheximide	Ethanol	Procainamide HCl	Valproic acid
Amitriptyline HCl	Dibutyl phthalate	Ethylene glycol	Verapamil HCl	
Busulfan	Diethyl phthalate	Glutethimide		

### 3.3.5 Selection of Reference Substances for Testing in Validation Study Phases Ib and II

Based on the *Guidance Document* (ICCVAM 2001b) recommendation that 10-20 chemicals be tested to qualify candidate *in vitro* cytotoxicity tests for determining starting doses for acute oral systemic toxicity assays, 12 reference substances were chosen from the 72

reference substances for testing in Phases Ib and II of the validation study (see **Table 3-8**).

The criteria for choosing these reference substances, in order of importance, were:

- two reference substances must be included from each of the five GHS toxicity categories and the unclassified category
- the log LD<sub>50</sub> (mmol/kg) must be within 0.699 of the RC regression (i.e., within the RC prediction interval). The *Guidance Document* (ICCVAM 2001b) recommends that reference substances for evaluating a cytotoxicity test to use with the RC regression fit the regression as closely as possible
- MEIC chemicals must be included. Cytotoxicity data from these phases (and Phase III of this study) and the available human toxicity information for the MEIC chemicals could be used to build a prediction model for estimating human lethal blood concentrations. Phase Ib reference substances arsenic trioxide and ethylene glycol are EDIT chemicals

If more than two chemicals in a GHS category met the above criteria, reference substances were selected so that the LD<sub>50</sub> was as close to the RC prediction as possible and/or to represent the range of toxicity in each GHS category.

Only nine reference substances of the 72 selected reference substances fit all three criteria. One reference substance was not within the RC acceptance interval. For the most toxic category (i.e., LD<sub>50</sub> ≤ 5 mg/kg), only one RC chemical, aminopterin, was within 0.699 of the RC regression. Sodium selenate, whose fit to the RC regression was unknown and had not been tested in the MEIC study, was included in this toxicity category. In addition, neither of the two reference substances chosen for the LD<sub>50</sub> ≤ 5 mg/kg category, aminopterin and sodium selenate, were MEIC chemicals.

455 **Table 3-8 Reference Substances Tested in Phases Ib and II**

Reference Substances	CASRN	RC Reference No.	MEIC Reference No.	Rodent Oral LD <sub>50</sub> <sup>1</sup> (mg/kg)	Observed – Predicted log LD <sub>50</sub> <sup>2</sup>
<b><i>LD<sub>50</sub> ≤ 5 mg/kg</i></b>					
Aminopterin	54-62-6	3	NA	3	-0.652
Sodium selenate	13410-01-0	NA	NA	1.6 <sup>3</sup>	NA
<b><i>5 &lt; LD<sub>50</sub> ≤ 50 mg/kg</i></b>					
Colchicine	64-86-8	6	60	6 <sup>4</sup>	-0.593
Arsenic III trioxide	1327-53-3	153	26	20	-0.591
<b><i>50 &lt; LD<sub>50</sub> ≤ 300 mg/kg</i></b>					
Cadmium II chloride	10108-64-2	81	NA	88	-0.336
Sodium I fluoride	7681-49-4	106	14	180	-0.109
<b><i>300 &lt; LD<sub>50</sub> ≤ 2000 mg/kg</i></b>					
DL-Propranolol HCl	350-60-90	54	23	470 <sup>4</sup>	-0.023
Lithium I carbonate	544-13-2	327 <sup>4</sup>	20	1187 <sup>4,5</sup>	-0.256 <sup>4</sup>
<b><i>2000 &lt; LD<sub>50</sub> ≤ 5000 mg/kg</i></b>					
Potassium I chloride	7447-40-7	346	50	2602	0.085
Chloramphenicol	56-75-7	91	45	3393	0.441
<b><i>LD<sub>50</sub> &gt; 5000 mg/kg</i></b>					
2-Propanol	67-63-0	128	10	5843	0.396
Ethylene glycol	107-21-1	360	7	8567	0.321

<sup>1</sup>From the RC (Halle 1998) unless otherwise indicated. Data for rats unless otherwise indicated.

<sup>2</sup>Available only for chemicals included in the RC. This figure characterizes the log LD<sub>50</sub> deviation from the RC regression. Outliers are > ± 0.699 from the regression line.

<sup>3</sup>RTECS<sup>®</sup> (MDL Information Systems 2002).

<sup>4</sup>Mouse data.

<sup>5</sup>Data for lithium sulfate.

Abbreviations: CASRN = Chemical Abstracts Service Registry Number; RC = Registry of Cytotoxicity; MEIC = Multicentre Evaluation of *In Vitro* Cytotoxicity; NA – not applicable; chemical not included in the RC and/or MEIC studies.

### 3.3.6 Unsuitable and Challenging Reference Substances

Several reference substances could not be adequately tested for cytotoxicity in either or both of the 3T3 or NHK NRU test methods. Under the conditions of the NRU cytotoxicity test, the following reference substances did not produce sufficient toxicity at soluble concentrations for calculation of an IC<sub>50</sub> at the highest concentrations that could be tested:

- carbon tetrachloride in either the 3T3 or NHK test method in all three laboratories
- xylene in either test method in two laboratories

- methanol in the 3T3 test method in all three laboratories and in the NHK test method in two laboratories
- lithium carbonate in the 3T3 test method in two laboratories
- 1,1,1-trichloroethane in the NHK test method in two laboratories
- valproic acid in the 3T3 test method in one laboratory

Other reference substances were difficult to test, but three acceptable tests were obtained after a number of trials.

- Acetonitrile and 2-propanol were so volatile and nontoxic that, even with the use of film plate sealers, one to seven tests failed at each laboratory. Tests with these two reference substances often failed the VC and data points criteria.
- Disulfoton failed at least one test in both test methods in two laboratories due to inadequate toxicity and solubility.
- Dibutyl phthalate failed one 3T3 test at one laboratory and one NHK test at one laboratory due to inadequate toxicity and solubility.
- Lindane failed one 3T3 test due to inadequate toxicity and solubility and one 3T3 test due to volatility.
- Parathion failed one test due to inadequate toxicity and solubility in both the 3T3 and NHK test methods and one NHK test due to volatility.
- Diethyl phthalate failed one NHK test due to volatility.
- Digoxin, gibberellic acid, and strychnine failed at least one 3T3 test in more than one laboratory due to inadequate toxicity and solubility.

### 3.4 Reference Substance Procurement, Coding, and Distribution

Reference substances were purchased from the suppliers in the purities indicated in **Appendix F** and distributed by BioReliance Corporation (Rockville, MD). BioReliance also collected information from the suppliers on the analytical purity, composition, and stability of the reference substances. BioReliance tested the reference substances for solubility, packaged them into 4 g aliquots for shipment to the cytotoxicity testing laboratories, and archived two additional samples. All reference substances were randomly coded to conceal

the identities from the cytotoxicity testing laboratories. Each reference substance had a code unique for each testing facility. About 100 g of the positive control, SLS, was distributed to each laboratory and one additional sample was archived.

Reference substances were packaged to minimize damage during transit and shipped under appropriate storage conditions and according to proper regulatory transportation procedures. Testing facilities were notified upon shipment in order to prepare for receipt. With the exception of the positive control shipment, which was shipped directly to the Study Directors, the reference substances were shipped to the test facility Safety Officers. Reference substances shipments were accompanied by a sealed information packet containing the appropriate health and safety procedures for use (i.e., MSDS or equivalent documentation with information regarding the proper protection for handling, procedures for dealing with accidental ingestion or contact with skin or eyes, and procedures for containing and recovering spills) and a disclosure key for identifying reference substances by code. Also provided was a data sheet giving a minimum of essential information for each reference substance, including color, odor, physical state, weight or volume of sample, specific density for liquid reference substances, and storage instructions. The shipment directed the Safety Officer to:

- notify BioReliance and the SMT upon receipt of reference substances
- retain the health and safety package and provide the reference substances and chemical data sheets to the Study Director without revealing the identities of the reference substances
- notify the SMT if test facility personnel open the health and safety packet at any time during the study
- return the unopened health and safety package to BioReliance after testing is complete

### *Exceptions*

The Safety Officer for ECBC required the information on reference substance codes before the substances were shipped to the Safety Office to satisfy the facility's environmental procedures and requirements. The reference substance codes were stored in a classified safe

located in the Safety Office, which was in a building separate from the cytotoxicity testing laboratory. Cytotoxicity testing personnel had no access to the reference substance codes. The ECBC Safety Officer opened the sealed health and safety packets for lithium carbonate and ethanol upon receipt of those substances because the code information for these substances was not included in the list originally provided. ECBC cytotoxicity testing personnel never had access to the reference substance codes.

### **3.5 Reference Substances Recommended by the *Guidance Document* (ICCVAM 2001b)**

The *Guidance Document* method for evaluating basal cytotoxicity assays for use in predicting starting doses for acute oral toxicity assays provides the existing performance standard (ICCVAM 2001b) for the 3T3 and NHK NRU test methods. The *Guidance Document* specifically recommends testing the following 11 chemicals to qualify candidate basal cytotoxicity assays: sodium dichromate dihydrate, cadmium chloride, p-phenylenediamine, DL-propranolol HCl, trichlorfon, ibuprofen, nalidixic acid, salicylic acid, antipyrine, dimethylformamide, and glycerol (ICCVAM 2001b). Although the 11 reference chemicals recommended in the *Guidance Document* were considered as candidates for testing in the NICEATM/ECVAM validation study (see **Section 3.1.2**), only sodium dichromate dihydrate, cadmium chloride, DL-propranolol HCl, dimethylformamide, and glycerol were chosen for testing after the candidate chemicals were prioritized as described in **Section 3.1.3**. The other seven were excluded based on the criterion hierarchy used to determine the selected chemicals (e.g., were not MEIC chemicals, not identified as high exposure risk in TESS)

### **3.6 Summary**

Seventy-two reference substances were selected for testing in the NICEATM/ECVAM validation study. The reference substances were selected to represent: (1) the complete range of *in vivo* acute oral toxicity ranges (in terms of LD<sub>50</sub> values); (2) the types of substances regulated by various regulatory authorities; and (3) those with human toxicity data and/or



human exposure potential. To assure the complete range of toxicity was covered, the Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005) was used to select 12 chemicals for each acute oral toxicity category and 12 unclassified chemicals. The set of selected reference substances had the following characteristics:

- 38% (27/72) of the substances had pharmaceutical uses, 21% (15/72) had pesticide uses, 11% (8/72) had solvent uses, and 7% (5/72) had food additive uses. The remaining substances were used for a variety of manufacturing and consumer products
- relevance of the substances to human exposures was indicated by the fact that 58% (42/72) were included in the MEIC study, 24% (17/72) were included in the EDIT program, 64% (46/72) had human exposures reported by TESS, 71% (51/72) had been evaluated by NTP, and 25% (18/72) were included in EPA's HPV list
- 81% (58/72) of the substances were also included in the RC and 38% (22/58) of these were outliers with respect to the RC regression
- 76% (55/72) were organic compounds and 24% (17/72) were inorganic compounds. The most commonly represented classes of organic compounds were heterocyclic compounds (26%, 14/55), carboxylic acids (22%, 12/55), and alcohols (18%, 10/55)
- 19 substances (26%, 19/72,) were known to have active metabolites and three additional substances were expected to have active metabolites
- many of the selected chemicals had multiple target organs. The most common effects were neurological (40 chemicals), liver (17 chemicals), kidney (15 chemicals), and cardiovascular (10 chemicals). No target organ information was available for one chemical (gibberellic acid)

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1	<b>4.0</b>	<b><i>IN VIVO</i> RODENT TOXICITY REFERENCE VALUES USED TO ASSESS</b>	
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## **4.0 IN VIVO RODENT TOXICITY REFERENCE VALUES USED TO ASSESS THE ACCURACY OF THE 3T3 AND NHK NRU TEST METHODS**

The aim of the procedures and analyses presented in this section is to identify the most appropriate *in vivo* rodent toxicity data with which to compare the *in vitro* cytotoxicity data. The *in vitro* NRU cytotoxicity test methods are intended to be used in a weight of evidence approach to determine the starting dose for the *in vivo* acute oral systemic toxicity test methods using rodents. Thus, rodent LD<sub>50</sub> values from acute oral systemic toxicity tests are the most appropriate reference data for the *in vitro* NRU IC<sub>50</sub> values. This section describes the methods for identifying and evaluating the most appropriate rodent LD<sub>50</sub> data to use for determining reference LD<sub>50</sub> values for the 72 reference substances tested in the NICEATM/ECVAM validation study. These *in vivo* rodent toxicity reference values will be used in **Section 6** to establish the accuracy of the *in vitro* IC<sub>50</sub> data from the 3T3 and NHK NRU test methods for predicting LD<sub>50</sub> values from rodent acute oral systemic toxicity tests.

### **4.1 Methods Used to Determine *In Vivo* Rodent Toxicity Reference Values**

#### **4.1.1 Identification of Candidate *In Vivo* Rodent Toxicity Reference Data**

No animal experiments were performed to obtain *in vivo* reference data for acute oral systemic toxicity. To identify LD<sub>50</sub> reference data for the 72 reference substances, rat oral LD<sub>50</sub> data were located through literature searches, secondary references, and electronic database searches. PubMed and ISI Web of Science® searches were conducted using each chemical name and “lethal dose 50.” Secondary sources included NTP technical reports, Toxicological Profiles from the Agency for Toxic Substances and Disease Registry (ATSDR), Cosmetic Ingredient Reviews by the Cosmetics Industry Council, pesticide handbooks, Merck Index, and various other summary sources. **Table 4-1** lists databases searched via the Internet to locate references for rat oral LD<sub>50</sub> values. Rat LD<sub>50</sub> data were preferred because the current oral acute toxicity test guidelines recommend using rats (OECD 2001a, c, d; EPA 2002a). Taking the same approach used for the Registry of Cytotoxicity (RC), mouse LD<sub>50</sub> data were sought for a particular chemical if rat LD<sub>50</sub> values could not be located. [The RC is a database of acute oral LD<sub>50</sub> values for rats and mice, obtained from

63 RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and  
 64 cytotoxicity endpoints for chemicals with known molecular weights (Halle 1998).]  
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**Table 4-1 Internet Accessible Databases with LD<sub>50</sub> Information**

Database	Sponsor
Agency for Toxic Substances and Disease Registry (ATSDR)	U.S. Department of Health and Human Services (DHHS)
Center for Drug Evaluation and Research (CDER)	U.S. Food and Drug Administration (FDA)
CHEMFINDER	CambridgeSoft Corporation
Chemical Carcinogenesis Research Information System (CCRIS) National Cancer Institute (NCI) Website	NCI; National Institutes of Health (NIH); DHHS
Chemical Evaluation Search and Retrieval System (CESARS)	Michigan Department of Natural Resources; Ontario Ministry of the Environment; CCOHS CHEMpendium™
Chemical Hazard Response (CHRIS)	U.S. Coast Guard
Chemical Ingredients Database	U.S. Environmental Protection Agency (EPA) Office of Pesticide Programs (OPP); California EPA Department of Pesticide Regulation
CHEMINDEX CHEMINFO	Canadian Centre for Occupational Health and Safety (CCOHS) CHEMpendium™
ChemRTK High Production Volume (HPV) Challenge Program OPPT Chemical Fact Sheets Chemical Information Collection and Data Development	EPA Office of Pollution Prevention and Toxics (OPPT)
CIS Chemical Information	World Health Organization (WHO) International Programme on Chemical Safety (IPCS); CCOHS; International Labour Organisation (ILO) Occupational Safety and Health Information Centre (CIS)
Concise International Chemical Assessment Documents (CICADS)	WHO IPCS; CCOHS; ILO; United Nations Environment Programme (UNEP)
Consumer Product Safety Commission Website	U.S. Consumer Product Safety Commission (CPSC)
Deutsches Institut für Medizinische Dokumentation und Information (DIMDI) [The German Institute for Medical Documentation and Information] Registry of Cytotoxicity (RC)	Zentralstelle zur Erfassung und Bewertung von Ersatz- und Ergänzungsmethoden zum Tierversuch (ZEBET) [German Centre for the Documentation and Validation of Alternative Methods]
Developmental and Reproductive Toxicology/Environmental Teratology Information Center (DART <sup>®</sup> /ETIC)	EPA; The National Library of Medicine (NLM); The National Institute of Environmental Health Sciences (NIEHS); National Center for Toxicological Research (NCTR)
Emergency Response Guidebook (ERG 2000)	Transport Canada; U.S. Department of Transportation (DOT); Secretariat of Communications and Transportation of Mexico
Environmental Health Criteria (EHC) monographs Health and Safety Guides (HSG) International Agency for Research on Cancer (IARC)	WHO IPCS; CCOHS
European Centre for the Validation of Alternative Methods (ECVAM) Scientific Information Service (ECVAM SIS)	European Commission Joint Research Centre
HAZARDTEXT <sup>®</sup> ; MEDITEXT <sup>®</sup> ; INFOTEXT <sup>®</sup> ; SARATEXT <sup>®</sup> ; REPROTEXT <sup>®</sup> ; REPROTOX <sup>®</sup>	TOMES Plus <sup>®</sup> , MICROMEDEX, Greenwood Village, CO

**Table 4-1 Internet Accessible Databases with LD<sub>50</sub> Information**

Database	Sponsor
Integrated Risk Information System (IRIS)	EPA Office of Research and Development (ORD)
International Chemical Safety Cards (ICSC) IPCS/EC Evaluation of Antidotes Series	WHO IPCS; CCOHS; Commission of the European Union
International Uniform Chemical Information Database (IUCLID)	European Chemicals Bureau
Joint Expert Committee on Food Additives (JECFA) Joint Meeting on Pesticide Residues (JMPR) Pesticide Data Sheets (PDSs)	WHO IPCS; CCOHS; Food and Agriculture Organization (FAO) of the United Nations
Material Safety Data Sheets (MSDS)	Interactive Living Paradigms, Incorporated
Multicentre Evaluation of In Vitro Cytotoxicity (MEIC)	Scandinavian Society for Cell Toxicology
National Toxicology Program (NTP) Chemical Health and Safety Database	NIEHS
National Transportation Library	DOT
New Jersey Hazardous Substance Fact Sheets	New Jersey Department of Health and Senior Services
Oil and Hazardous Materials/Technical Assistance Data System (OHM/TADS)	EPA Office of Waste and Water Management
Organisation for Economic Co-operation and Development (OECD) Screening Information Data Sets (SIDS)	IPCS; CCOHS; International Register of Potentially Toxic Chemicals (IRPTC); UNEP
Pesticide Action Network Pesticide Database	Pesticide Action Network North America
Pesticide Product Information System (PPIS)	EPA Office of Pesticide Programs (OPP)
Poisons Information Monographs (PIMs)	IPCS; CCOHS
Registry of Toxic Effects of Chemical Substances (RTECS®) NIOSH Pocket Guide to Chemical Hazards	National Institute for Occupational Safety and Health (NIOSH)
SCORECARD	Environmental Defense
The EXTension TOXicology NETwork (EXTOXNET)	University of California, Davis; Oregon State University; Michigan State University; Cornell University; University of Idaho
The Right-to-Know Network (RTK NET)	Office of Management and Budget Watch; Center for Public Data access
Toxic Chemical Release Inventory (TRI) GENE-TOX	The National Library of Medicine (NLM)
Toxic Substances Control Act Test Submissions (TSCATS)	EPA OPPT
TOXLINE® Hazardous Substances Data Bank (HSDB) ChemIDplus	NLM (TOXNET)

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67 A total of 195 LD<sub>50</sub> references retrieved through these searches were reviewed and evaluated.68 Information regarding the materials and methods used to derive the 491 LD<sub>50</sub> values reported69 by these references were compiled and are provided in **Appendix H-1** in a spreadsheet70 format. **Appendix H-2** provides a narrative characterization and evaluation of the values.

71

#### 4.1.2 Criteria Used to Select Candidate *In Vivo* Rodent Toxicity Data for Determination of Reference Values

From the data retrieved, the goal was to derive a set of high quality reference LD<sub>50</sub> values (i.e., data that were collected using standardized protocols, accompanied by documentation showing that established testing procedures were followed in compliance with national and international GLP guidelines [OECD 1998; FDA 2003; EPA 2003a,b]). After a review of the collected data, the SMT determined that a requirement for GLP compliance would eliminate 99% (452 of the 459 values remaining after exclusion of 30 duplicate values and two erroneous values) of the oral LD<sub>50</sub> values, since only seven had been obtained in compliance with GLP guidelines. GLP-compliant studies were found for only four of the 72 (6%) reference substances.

The SMT then considered limiting the selection of LD<sub>50</sub> values to those from studies that used the type of animals recommended by the current oral acute toxicity test guidelines, since these guidelines will be used for future acute systemic toxicity testing. The current guidelines recommend using young adult rats, 8-12 weeks of age, of a common laboratory strain and the most sensitive sex (OECD 2001a, c, d; EPA 2002a). Female animals are suggested if there is no information on which to determine the most sensitive sex. Selecting LD<sub>50</sub> values from animals that fit this description yielded a limited number of values. Only 3% (14/459) of the oral LD<sub>50</sub> values were determined using 8-12 week old female laboratory rats. Another 15 LD<sub>50</sub> values were obtained with female rats in an appropriate weight range (~ 176-250 g according to Charles River [<http://www.criver.com>], Harlan [<http://www.harlan.com/us/index.htm>], and Taconic Farms [<http://www.taconic.com/anmodels/spragued.htm>] websites) for that age. Thus, only 6% (29/459) of the LD<sub>50</sub> values in the database, covering 21 of the 72 reference substances (29%), were obtained from studies that used the strain, sex, and age of rats recommended by current test guidelines (OECD 2001a; EPA 2002a).

#### *Final Exclusion Criteria*

Since so few studies met the initial criteria (i.e., GLP compliance and use of animals recommended by current acute oral toxicity test guidelines), the database was reviewed and



evaluated to derive alternative criteria for the development of reference LD<sub>50</sub> values. For this evaluation, the SMT looked for commonalities among the data records that, when selected, provided a comparable data set for each chemical. Review of the available data indicated that the majority of acute oral toxicity tests were conducted with unanesthetized young adult laboratory rats of both genders, to which chemicals were administered by gavage. Thus, to compile a homogenous set of reference LD<sub>50</sub> values for each chemical, the selection process was revised to exclude studies that reflected the following, less typical, materials and methods:

- feral rats
- rats < 4 weeks of age
- anesthetized rats
- test chemical administered in food or capsule
- LD<sub>50</sub> reported as a range or inequality

Data from feral rats were excluded, since the health status of these animals was uncertain. All laboratory rat strains/stocks were deemed acceptable, since they were expected to be healthy and provided with adequate care and housing during testing. Data from neonates or weanlings were excluded since their sensitivity to chemical toxicity may differ from that of adults. Four weeks was considered the minimum acceptable age, since rats are weaned at about 3 weeks of age (Barrow 2000). Data from feeding experiments or experiments that involved administration of the chemical in capsules were also excluded, since gavage is the most common mode of administration for acute oral studies and the rate of gastrointestinal absorption for these methods is likely to be different (Nebendahl 2000). Since LD<sub>50</sub> point estimates are required for the prediction model, LD<sub>50</sub> values reported as ranges or inequalities were considered unacceptable.

#### *Assumptions*

The level of detail for materials and methods for the LD<sub>50</sub> studies varied greatly. Some studies reported only the use of white rats while other acute oral toxicity studies provided complete information on stock/strain, gender, and age of animals; the number of animals tested per dosing group, method of administration, doses administered, clinical signs, and

times of death. To use as much of the available data as possible, the following assumptions were made if a study report did not declare otherwise.

- The rats were assumed to have been young adults of a common laboratory strain.
- The rats were assumed to have been unanesthetized.
- The oral route of administration was by gavage.

#### *Calculation of Reference Values*

If there were multiple acceptable LD<sub>50</sub> values for a chemical after the application of the exclusionary criteria, outliers at the 99% level (Dixon and Massey 1981) were excluded. A geometric mean and 95% confidence limits were calculated from the remaining values to serve as the reference LD<sub>50</sub>. A geometric mean is the antilog of the mean of the logarithm of the values and it is less affected by extreme values than the arithmetic mean. Use of a geometric mean corresponds with the approach used for the RC regression to obtain a single IC<sub>50</sub> value from multiple IC<sub>50</sub> values (Halle 1998) and with the approach used to derive the IC<sub>50</sub> value for each chemical for the *in vitro* - *in vivo* regressions for the NICEATM/ECVAM validation study (see **Section 6**).

In addition to the statistical evaluation of outliers, an extreme value, which was not a statistical outlier, for trichloroacetic acid was also evaluated based on biological plausibility. There were five LD<sub>50</sub> values that ranged from 400-8900 mg/kg after applying the exclusionary criteria for trichloroacetic acid. The lowest value of 400 mg/kg was rejected as biologically implausible since up to 1000 mg/kg/day has been used in chronic rodent carcinogenicity studies (EPA 1996).

#### *Use of Rat and Mouse Data*

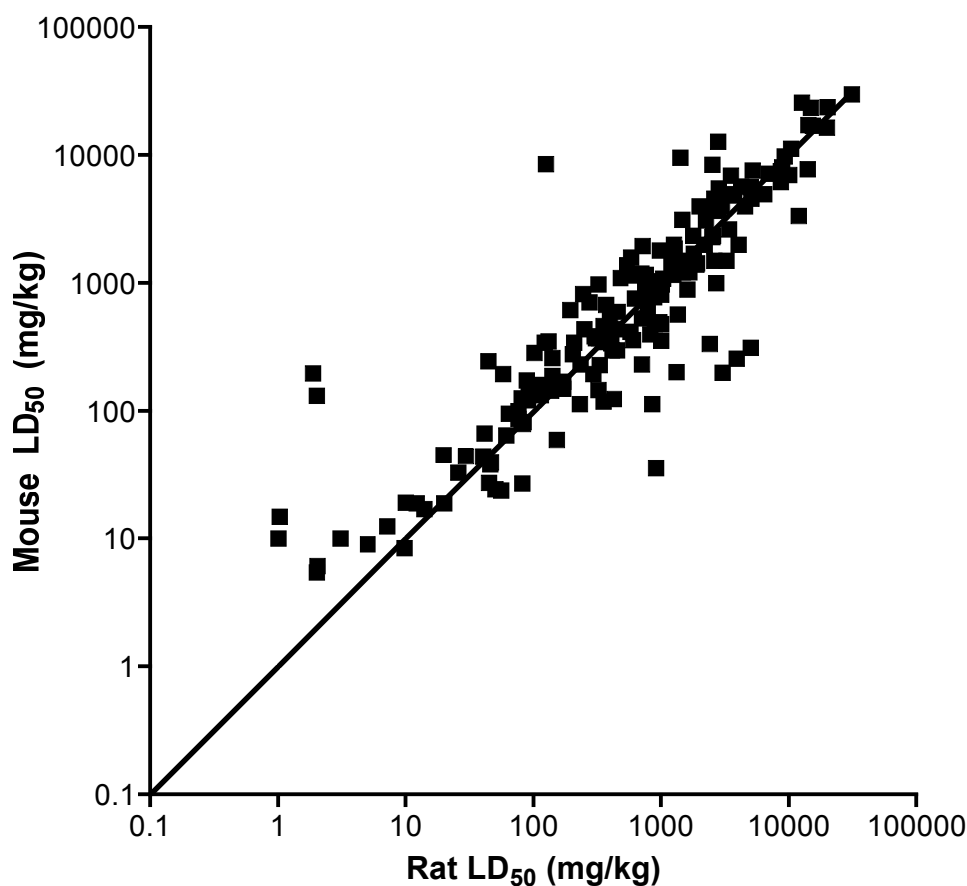
If no rat oral LD<sub>50</sub> values could be found for a chemical, mouse oral LD<sub>50</sub> values were located, retrieved, and evaluated by the same method as that used for rat oral values. Although a model using entirely rat data or entirely mouse data would be preferable, the use of mouse values was considered to be justified by a significant correlation of rat and mouse oral LD<sub>50</sub> values reported by Ekwall et al. (1998a) for the 50 chemicals tested in the MEIC

study. Using values from RTECS<sup>®</sup>, Ekwall et al. (1998a) reported a coefficient of determination,  $R^2$ , of 0.85 for a linear regression analysis of rat LD<sub>50</sub> - mouse LD<sub>50</sub>.

Furthermore, Halle (1998) compared IC<sub>50</sub> - LD<sub>50</sub> linear regressions with 285 rat values and 242 mice values and found no significant difference in the intercepts or slopes.

A correlation of the 173 chemicals in the RC that had both rat and mouse LD<sub>50</sub> values is shown in **Figure 4-1**. A Spearman correlation analysis of the log transformed rat and mouse data yielded a significant correlation ( $p < 0.0001$ ) with  $r_s = 0.88$ .

**Figure 4-1 Correlation of Rat and Mouse LD<sub>50</sub> Values for 173 RC Chemicals**



The diagonal line shows the 1:1 relationship.

## 4.2 Final *In Vivo* Rodent Toxicity Reference Values

After the application of the exclusionary criteria, there were 385 acceptable LD<sub>50</sub> values with which to calculate reference values. **Table 4-2** shows the reference LD<sub>50</sub> value for each reference substance in ascending order. The reference values are the geometric means of the acceptable LD<sub>50</sub> values. Also shown for each substance are the 95% confidence limits around the mean, the ratio of the maximum to the minimum acceptable value, the number of LD<sub>50</sub> values used to calculate the reference value, the number of LD<sub>50</sub> values available (not including duplicate values or the erroneous values for acetylsalicylic acid and sodium oxalate), and the LD<sub>50</sub> initially used for hazard category (often referred to as “toxicity” or “LD<sub>50</sub>” category) classification of the substance (see **Table 3-2**). Ratios for the maximum to minimum LD<sub>50</sub> values ranged from 1.0 to 25.9. The average ratio was 4.1. Six of the 62 reference substances for which ratios were calculated had ratios greater than one order of magnitude: triethylenemelamine, parathion, busulfan, triphenyltin hydroxide, phenol, and trichloroacetic acid. Three of these substances, triethylenemelamine, parathion, and busulfan, were in the two highest toxicity categories (i.e., LD<sub>50</sub> ≤ 50 mg/kg).

**Table 4-2** shows the reference substances grouped by GHS acute oral toxicity category (UN 2005) using the reference LD<sub>50</sub> values. The initial categorization for this study, which used the LD<sub>50</sub> values in the far right column of **Table 4-2** (i.e., values reported in **Table 3-2**, which come from the RC unless otherwise specified), placed 12 substances in each toxicity category. **Table 4-3** compares the number of substances in each GHS toxicity category based on the reference LD<sub>50</sub> values with the number of substances in each category based on the initial LD<sub>50</sub> values. **Table 4-3** shows that the initial and reference LD<sub>50</sub> values placed 74% of the substances in the same GHS category. Compared with the initial LD<sub>50</sub>, the reference LD<sub>50</sub> was higher for 25% of the substances and lower for 1% of the substances.

**Table 4-2 Reference LD<sub>50</sub> Values by GHS Category<sup>1</sup>**

GHS Category <sup>1</sup> /Chemical	Reference Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	95% Confidence Interval <sup>3</sup> (mg/kg)	Reference Oral LD <sub>50</sub> <sup>2</sup> (mmol/kg)	95% Confidence Interval <sup>3</sup> (mmol/kg)	Maximum: Minimum Value <sup>3</sup>	N Averaged <sup>5</sup>	Initial Rodent Oral LD <sub>50</sub> <sup>6</sup> (mg/kg)
<b>LD<sub>50</sub> ≤ 5 mg/kg (N = 7)</b>							
Cycloheximide	2	NC	0.00711	NC	2.5	3	2
Phenylthiourea	3	NC	0.0197	NC	NC	1	3
Sodium selenate	3	NC	0.0159	NC	3.7	2	2 <sup>7</sup>
Epinephrine bitartrate	4 (mouse)	NC	0.0196	NC	NC	1	4 (mouse)
Triethylenemelamine	4	1-25	0.0120	0.0037-0.12	13.0	4	1
Physostigmine	5	NC	0.0182	NC	NC	1	5 <sup>7</sup>
Disulfoton	5	2-10	0.0182	0.009-0.036	5.5	6	2
<b>5 &lt; LD<sub>50</sub> ≤ 50 mg/kg (N = 12)</b>							
Parathion	6	3-12	0.0209	0.010-0.041	16.7	10	2
Strychnine	6	NC	0.0188	NC	6.9	3	2 <sup>7</sup>
Aminopterin	7	NC	0.016	NC	NC	1	3 (mouse)
Potassium cyanide	7	5-10	0.111	0.077-0.15	2.0	7	10
Busulfan	12	NC	0.049	0.008-0.38	15.3	4	2
Colchicine	15 (mouse)	NC	0.0375	NC	4.9	3	6 (mouse)
Thallium I sulfate	25	NC	0.0495	NC	NC	1	29 (mouse)
Arsenic III trioxide	25	10-64	0.127	0.050-0.32	6.3	5	20
Endosulfan	28	NC	0.068	NC	2.4	2	18 <sup>7</sup>
Digoxin	28	NC	0.0362	NC	NC	1	18 (mouse)
Mercury II chloride	40	27-60	0.148	0.010-0.22	7.7	10	1
Sodium arsenite	44	36-53	0.336	0.28-0.40	1.5	5	41 <sup>7</sup>
<b>50 &lt; LD<sub>50</sub> ≤ 300 mg/kg (N = 12)</b>							
Sodium dichromate dihydrate	51	44-58	0.193	0.17-0.22	1.9	11	50
Dichlorvos	59	40-88	0.266	0.18-0.40	5.7	9	17 <sup>7</sup>
Nicotine	70	68-72	0.430	0.42-0.44	1.0	4	50
Fenpropathrin	76	57-100	0.217	0.16-0.29	3.4	9	18 <sup>7</sup>
Hexachlorophene	82	68-98	0.202	0.17-0.24	3.8	19	61
Paraquat	93	65-132	0.498	0.35-0.71	2.0	5	58
Lindane	100	78-129	0.344	0.27-0.44	1.4	4	76
Verapamil HCl	111	NC	0.226	NC	1.1	2	108
Sodium I fluoride	127	92-175	3.020	2.19-4.16	4.4	12	180

**Table 4-2 Reference LD<sub>50</sub> Values by GHS Category<sup>1</sup>**

GHS Category <sup>1</sup> /Chemical	Reference Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	95% Confidence Interval <sup>3</sup> (mg/kg)	Reference Oral LD <sub>50</sub> <sup>2</sup> (mmol/kg)	95% Confidence Interval <sup>3</sup> (mmol/kg)	Maximum: Minimum Value <sup>3</sup>	N Averaged <sup>5</sup>	Initial Rodent Oral LD <sub>50</sub> <sup>6</sup> (mg/kg)
Cadmium II chloride	135	88-208	0.738	0.48-1.14	2.4	5	88
Diquat dibromide	160	NC	0.466	NC	1.9	3	231
Phenobarbital	224	NC	0.966	NC	2.0	3	163
<b>300 &lt; LD<sub>50</sub> ≤ 2000 mg/kg (N = 16)</b>							
Caffeine	310	256-374	1.59	1.32-1.93	2.5	10	192
Triphenyltin hydroxide	329	208-520	0.896	0.57-1.42	25.9	15	44
Haloperidol	330	NC	0.877	NC	6.6	2	128 <sup>7</sup>
Amitriptyline HCl	348	NC	1.18	NC	1.2	2	319
Propranolol HCl	466	NC	1.575	NC	NC	1	470 (mouse)
Cupric sulfate * 5 H <sub>2</sub> O	474	269-836	1.90	1.08-3.35	4.1	6	300
Phenol	548	434-692	5.82	4.82-7.68	4.7	14	414
Lithium carbonate	590	479-728	7.98	6.5-9.9	1.4	4	1187 (mouse; sulfate salt)
Glutethimide	600	NC	2.76	NC	NC	1	600
Sodium oxalate	633	NC	4.724	NC	1.3	2	155 (mouse) <sup>8</sup>
Chloral hydrate	638	391-1040	3.86	2.36-6.29	1.8	4	479
Atropine sulfate	819	641-1045	1.21	0.95-1.54	1.9	7	623
Valproic acid	995	NC	6.91	NC	2.2	2	670 <sup>7</sup>
Meprobamate	1387	1291-1489	6.35	5.92-6.82	1.2	6	794 <sup>7</sup>
Acetylsalicylic acid	1506	1224-1854	8.36	6.8-10.3	4.6	14	1000
Procainamide HCl	1950	NC	8.286	NC	NC	1	1950 <sup>7</sup>
<b>2000 &lt; LD<sub>50</sub> ≤ 5000 mg/kg (N = 11)</b>							
Acetaminophen	2163	NC	14.3	NC	1.2	2	2404
Potassium I chloride	2799	NC	37.6	NC	1.2	2	2602
Carbamazepine	2805	NC	11.9	NC	2.1	2	1957 <sup>7</sup>
Boric acid	3426	2617-4486	55.4	42.3-72.6	1.9	6	2660 <sup>7</sup>
5-Aminosalicylic acid	3429	NC	22.4	NC	1.5	2	7749 (mouse)
Chloramphenicol	3491	NC	10.8	NC	2.0	3	3393
Acetonitrile	3598	2951-4375	87.6	71.9-107	6.2	26	3798
Lactic acid	3639	NC	40.3	NC	1.1	2	3730
Carbon tetrachloride	3783	3024-4732	24.6	20-31	4.3	15	2799
Sodium chloride	4046	2917-5623	69.3	50-96	2.0	5	2998

**Table 4-2 Reference LD<sub>50</sub> Values by GHS Category<sup>1</sup>**

GHS Category <sup>1</sup> /Chemical	Reference Oral LD <sub>50</sub> <sup>2</sup> (mg/kg)	95% Confidence Interval <sup>3</sup> (mg/kg)	Reference Oral LD <sub>50</sub> <sup>2</sup> (mmol/kg)	95% Confidence Interval <sup>3</sup> (mmol/kg)	Maximum: Minimum Value <sup>3</sup>	N Averaged <sup>5</sup>	Initial Rodent Oral LD <sub>50</sub> <sup>6</sup> (mg/kg)
Xylene	4667	1294-16827	43.9	12-158	5.6	4	4300
<b>LD<sub>50</sub> &gt; 5000 mg/kg (N = 14)</b>							
2-Propanol	5105	4624-5636	84.9	77-94	1.3	6	5843
Trichloroacetic acid	5229	2745-9961	32.0	16.8-61.0	2.7	4	4999
Dimethylformamide	5309	3548-7925	72.6	49-108	2.6	6	2800
Citric Acid	5929	NC	30.9	NC	3.9	2	3000 <sup>7</sup>
Gibberellic acid	6040	NC	17.4	NC	1.1	2	6305
Propylparaben	6332 (mouse)	NC	35.1	NC	NC	1	6326 (mouse)
Ethylene glycol	7161	6266-8204	115.4	101-132	2.5	16	8567
Methanol	8710	6223-12218	272	194-381	2.3	6	13012
Dibutylphthalate	8892	6180-12794	31.9	22-46	1.7	4	11998
Diethylphthalate	9311	NC	41.9	NC	1.2	2	8602
Sodium hypochlorite	10328	NC	62.8	NC	1.6	2	8910 <sup>9</sup>
Ethanol	11324	8610-14894	245.7	187-323	2.5	8	14008
1,1,1-Trichloroethane	12078	10000-14588	90.5	75-109	1.7	6	10298
Glycerol	19770	10495-37154	215	114-403	2.2	4	12691

<sup>1</sup>GHS- Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005). Chemicals categorized using reference oral LD<sub>50</sub>.

<sup>2</sup>Based on a geometric mean of acceptable LD<sub>50</sub> values from laboratory rats unless otherwise specified.

<sup>3</sup>For the geometric mean of the acceptable LD<sub>50</sub> values.

<sup>4</sup>Ratio of minimum acceptable LD<sub>50</sub> to maximum acceptable LD<sub>50</sub>

<sup>5</sup>Number of values used for geometric mean.

<sup>6</sup>Values rounded to the nearest one; from the RC unless otherwise specified; rat data unless otherwise specified.

<sup>7</sup>RTECS® (MDL Information Systems 2002).

<sup>8</sup>RC reference for rat oral LD<sub>50</sub> of 155 mg/kg is Shrivastava et al. (1992), which references Klinger and Kersten (1961). Klinger and Kersten (1961) indicates the value was determined by intraperitoneal administration to mice.

<sup>9</sup>NLM (2002).

Abbreviations: NC – Not calculated. N was three or less and considered too small for a meaningful result.

221 The reference LD<sub>50</sub> values caused the reclassification of 19 reference substances (i.e., the  
222 sum of the numbers in the mismatching cells in **Table 4-3**). Seven substances remain in the  
223 lowest LD<sub>50</sub> category (i.e., LD<sub>50</sub> ≤ 5 mg/kg). Five substances originally in this category  
224 (aminopterin, mercury chloride, busulfan, parathion, and strychnine) moved to the next  
225 higher category (5 < LD<sub>50</sub> ≤ 50 mg/kg) due the change in the reference LD<sub>50</sub> values. In the 5  
226 < LD<sub>50</sub> ≤ 50 mg/kg category, four substances (dichlorvos, fenprothrin, sodium dichromate  
227 dihydrate, and nicotine) moved to the next higher LD<sub>50</sub> category (50 < LD<sub>50</sub> ≤ 300 mg/kg)  
228 and one substance (triphenyltin hydroxide) moved up two categories to 300 < LD<sub>50</sub> ≤ 2000  
229 mg/kg. In the 50 < LD<sub>50</sub> ≤ 300 category, four substances (haloperidol, caffeine, copper  
230 sulfate pentahydrate, and sodium oxalate) moved up to the next toxicity category (300 <  
231 LD<sub>50</sub> ≤ 2000 mg/kg). In the 300 < LD<sub>50</sub> ≤ 2000 mg/kg category, only carbamazepine moved  
232 up to the next toxicity category (2000 < LD<sub>50</sub> ≤ 5000 mg/kg). In the 2000 < LD<sub>50</sub> ≤ 5000  
233 mg/kg category, citric acid, trichloroacetic acid and dimethylformamide moved up to the next  
234 higher LD<sub>50</sub> category (LD<sub>50</sub> > 5000 mg/kg). In the LD<sub>50</sub> > 5000 mg/kg category, 5-  
235 aminosalicylic acid moved down into the 2000 < LD<sub>50</sub> ≤ 5000 mg/kg category. 5-  
236 Aminosalicylic acid was the only substance that moved to a lower LD<sub>50</sub> (i.e., more toxic)  
237 category.



238 **Table 4-3 GHS<sup>1</sup> Toxicity Category Matches for the Initial and Reference LD<sub>50</sub> Values<sup>2</sup>**

Initial LD <sub>50</sub> (mg/kg)	Reference LD <sub>50</sub>						Total	Category Match	Reference LD <sub>50</sub> Lower	Reference LD <sub>50</sub> Higher
	≤ 5	5-50	50 - 300	300 - 2000	2000 - 5000	> 5000				
≤ 5	7	5	0	0	0	0	12	58%	0%	42%
5-50	0	7	4	1	0	0	12	58%	0%	42%
50 - 300	0	0	8	4	0	0	12	67%	0%	33%
300 - 2000	0	0	0	11	1	0	12	92%	0%	8%
2000 - 5000	0	0	0	0	9	3	12	75%	0%	25%
> 5000	0	0	0	0	1	11	12	92%	8%	0%
Total	7	12	12	16	11	14	72	74%	1%	25%

<sup>1</sup>Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005):

≤ 5: LD<sub>50</sub> ≤ 5 mg/kg  
 5 - 50: 5 < LD<sub>50</sub> ≤ 50 mg/kg  
 50 - 300: 50 < LD<sub>50</sub> ≤ 300 mg/kg  
 300 - 2000: 300 < LD<sub>50</sub> ≤ 2000 mg/kg  
 2000 - 5000: 2000 < LD<sub>50</sub> ≤ 5000 mg/kg  
 > 5000: LD<sub>50</sub> > 5000 mg/kg

<sup>2</sup>Number of chemicals. Darkened cells show the number of chemicals for which the categories match.

### 4.3 Relevant Toxicity Information for Humans

The relevance of rodent acute systemic toxicity data to human lethality was assessed by the MEIC program as a comparison to the evaluation of *in vitro* predictions of human acute toxicity (Ekwall et al. 1998b). The MEIC program collected mouse and rat oral LD<sub>50</sub> data from RTECS® (Ekwall et al. 1998a). Mean lethal doses in humans were collected mainly from handbooks containing human clinical toxicity information (Ekwall et al. 1998a). Data from the handbooks were supplemented, when necessary, by an in-house compendium from the Swedish Poisons Information Centre. Ekwall et al. (1998b) calculated least squares linear regressions for the prediction of the mean human lethal doses by rat oral LD<sub>50</sub> data and by mouse oral LD<sub>50</sub> data for the 50 MEIC chemicals using units of log mol/kg. Ekwall et al. (1998b) reported  $R^2 = 0.607$  for the rat LD<sub>50</sub> prediction of mean human lethal doses and  $R^2 = 0.653$  for the mouse LD<sub>50</sub> prediction of mean human lethal doses.

The relevance of the NRU data collected in the NICEATM/ECVAM study to the prediction of human acute toxicity will be addressed elsewhere by ECVAM.

### 4.4 Accuracy and Reliability of the *In Vivo* Rodent Toxicity Reference Values

Accuracy is the closeness of agreement between the results of an alternative test method and an accepted reference test method (ICCVAM 2003). Since there is no accepted reference test for the rodent acute oral toxicity test, the accuracy of the reference LD<sub>50</sub> values for predicting the oral LD<sub>50</sub> in humans cannot be determined. Acute toxicity testing in rodents leads to a relative ranking of the toxicity of chemicals for regulatory purposes. The reliability of the reference LD<sub>50</sub> values determined in this section may be judged by evaluating the range of acceptable LD<sub>50</sub> values for each chemical and by comparing the values (and their variability) with other LD<sub>50</sub> values.

#### *Variability Among the Acceptable LD<sub>50</sub> Values*

The variability of the acceptable LD<sub>50</sub> values used to calculate the reference value for each reference substance was assessed by calculating the ratio of the maximum to the minimum

value (see **Table 4-2**). For the 62 reference substances with more than one acceptable LD<sub>50</sub> value, the average maximum:minimum ratio ranged from 1.1 to 25.9 with a mean of 4.3 and a median of 2.2. The maximum:minimum ratios were greater than 10 for four substances: triethylenemelamine, parathion, busulfan, and triphenyltin hydroxide.

The low LD<sub>50</sub> values for triethylenemelamine, busulfan, and parathion may have contributed to the high maximum:minimum ratios for these substances, since the range of values did not seem to be extremely wide. The four LD<sub>50</sub> values for triethylenemelamine ranged from 1 to 13 mg/kg, the four LD<sub>50</sub> values for busulfan ranged from 1.9 to 29 mg/kg, and the 10 LD<sub>50</sub> values for parathion ranged from 1.8 to 30 mg/kg. **Table 4-4** shows the maximum:minimum ratios by toxicity category. The substances in the higher toxicity categories (i.e., LD<sub>50</sub> ≤ 50 mg/kg) tended to have higher maximum:minimum LD<sub>50</sub> ratios than substances in the lower toxicity categories (i.e., LD<sub>50</sub> > 50 mg/kg); however, there were also fewer substances in the higher toxicity categories.

**Table 4-4 Maximum:Minimum LD<sub>50</sub> Ratios by GHS<sup>1</sup> Toxicity Category**

GHS Category <sup>1</sup> (LD <sub>50</sub> in mg/kg)	Mean Maximum:Minimum LD <sub>50</sub> Ratio	Median Maximum:Minimum LD <sub>50</sub> Ratio	Range of Maximum:Minimum LD <sub>50</sub> Ratio	N
LD <sub>50</sub> ≤ 5	6.2	4.6	2.5 – 13.0	4
5 < LD <sub>50</sub> ≤ 50	7.1	6.3	2.0 - 16.7	9
50 < LD <sub>50</sub> ≤ 300	2.4	1.9	1.1 - 5.7	12
300 < LD <sub>50</sub> ≤ 2000	4.6	2.2	1.2 - 25.9	13
2000 < LD <sub>50</sub> ≤ 5000	2.6	2.0	1.2- 22.3	11
LD <sub>50</sub> > 5000	2.3	2.3	1.1 - 3.9	13

<sup>1</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005).

N = number of chemicals with more than one acceptable LD<sub>50</sub> value after application of the exclusion criteria in **Section 4.1.2**.

#### *Comparison of Reference Values with RC Values*

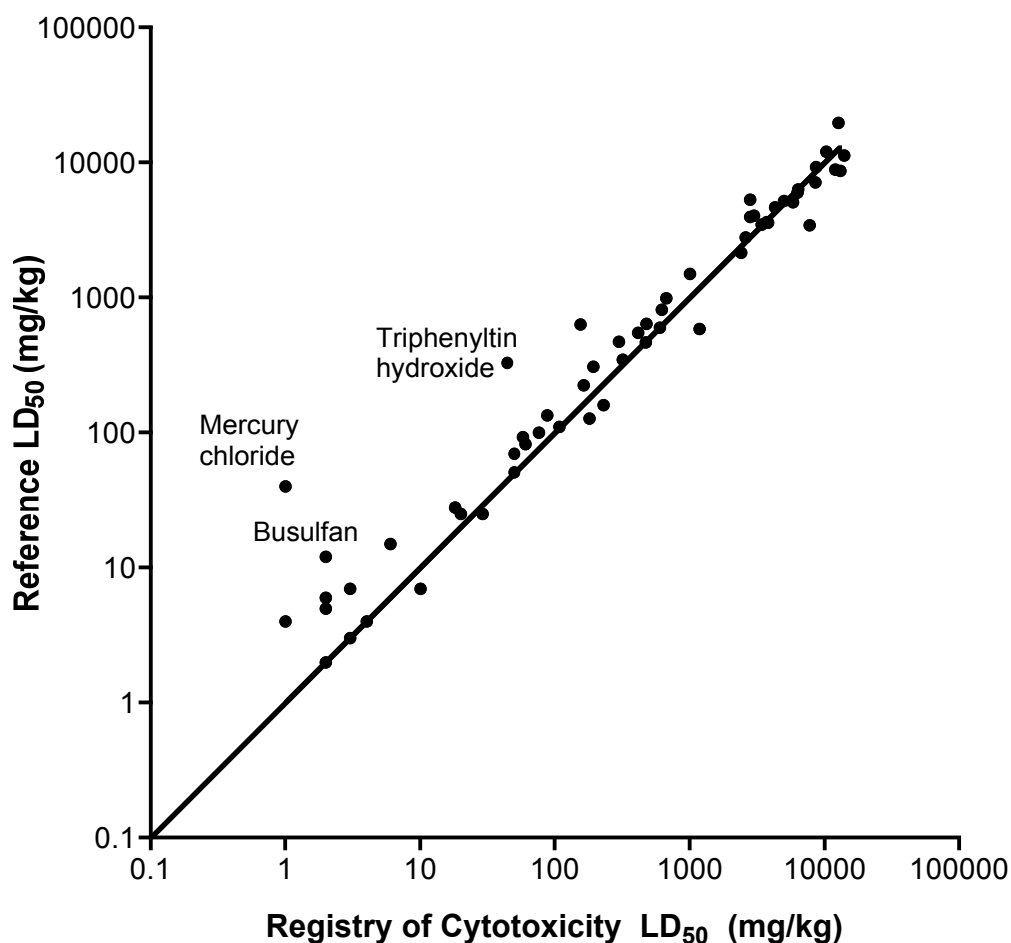
The correspondence of the reference LD<sub>50</sub> values with the LD<sub>50</sub> values for the 58 validation study reference substances in common with the RC are shown on a log scale in **Figure 4-2**. A Spearman correlation analysis for the two sets of log transformed values yielded a significant correlation ( $p < 0.0001$ ) with a correlation coefficient,  $r_s$ , of 0.97. **Figure 4-2** shows that the reference values tended to be higher than the RC LD<sub>50</sub> values. The LD<sub>50</sub>

values used in the RC were largely from the 1983/84 RTECS<sup>®</sup>, which publishes the lowest LD<sub>50</sub> value found for a particular chemical without regard to the source (i.e., from a primary publication or a review) and without scientific review before publication. Thus, since the reference LD<sub>50</sub> values are based on the geometric mean from multiple studies, it is not surprising that these values tended to be higher than those included in the RC database.

When comparing the reference LD<sub>50</sub> values to the RC values, the substances with the largest differences in LD<sub>50</sub> were busulfan, triphenyltin hydroxide, and mercury chloride (see **Figure 4-2**).

- The reference LD<sub>50</sub> for busulfan was six times that of the RC value (12 mg/kg vs. 1.9 mg/kg). The RC value (i.e., the 1983/84 RTECS<sup>®</sup> value) was from a paper by Schmahl and Osswald (1970) in which they cited a rat oral LD<sub>50</sub> of 1.86 mg/kg. We also found rat oral LD<sub>50</sub> values of 28 and 29 mg/kg for male and female Sprague-Dawley rats, respectively (Matsuno et al. 1971).
- The reference LD<sub>50</sub> for triphenyltin hydroxide was 7.5 times the RC LD<sub>50</sub> (329 mg/kg vs. 44 mg/kg). The 15 LD<sub>50</sub> values used to determine the reference value included the RC value and had a wide range, 44-1200 mg/kg. Due to the relatively large variation in the data, neither the highest nor the lowest values were statistical outliers.
- The reference LD<sub>50</sub> for mercury chloride was 40 mg/kg, while the RC value was 1 mg/kg. The RC value was from a summary document that reported the rat oral LD<sub>50</sub> as a range of 1-5 mg/kg (Worthing and Walker 1991). Since it was reported as a range, it was excluded from the calculation of the reference value. The remaining 11 LD<sub>50</sub> values ranged from 12 to 160 mg/kg. As previously stated, 160 mg/kg was an outlier compared to the other 10 values and therefore excluded from the calculation of the reference value.

336 **Figure 4-2 Correlation of LD<sub>50</sub> Values for the 58 RC Chemicals**



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338 The diagonal line shows the 1:1 relationship.

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#### 341 *Comparison of the Variability Among Acceptable LD<sub>50</sub> Values to Other Studies*

342 When compared to other studies on the variation of acute oral LD<sub>50</sub> values, the variation  
 343 determined for 61 reference substances with multiple LD<sub>50</sub> values was not unusual. Weil and  
 344 Wright (1967) showed that even LD<sub>50</sub> values from multiple laboratories using exactly the  
 345 same protocol varied by as much as five-fold for the 10 substances they tested in eight  
 346 laboratories. In addition, they showed that allowing the laboratories to use their own  
 347 protocols for LD<sub>50</sub> determination produced data somewhat more variable, but the observed  
 348 differences were not reported. Another multicenter study that did not control the LD<sub>50</sub>  
 349 protocols reported maximum:minimum ratios from 3.6 to 11.3 for five substances (Hunter et

al. 1979). The 65 participating laboratories in eight countries reported LD<sub>50</sub> values ranging from 44 to 5420 mg/kg for the five substances tested:

- Compound I/PCP 44 – 523 mg/kg
- Compound II/Sodium salicylate 800 - 4150 mg/kg
- Compound III/Aniline 350 – 1280 mg/kg
- Compound IV/Acetanilide 805 – 5420 mg/kg
- Compound V/Cadmium chloride 70 – 513 mg/kg

The results of a follow on study in which the same substances were tested by about 100 laboratories in 13 countries showed that adhering to a specific protocol reduced the range of maximum:minimum LD<sub>50</sub> ratios from 3.6 – 11.3 to 2.4 – 8.4 (Zbinden and Flury-Roversi 1981).

Although the LD<sub>50</sub> data collected from the literature for the NICEATM/ECVAM validation study used various strains, sexes, observation durations, and calculation methods for estimating the LD<sub>50</sub>, the variation in LD<sub>50</sub> values for individual substances was similar to the data by Hunter et al. (1979). The current study found six of the 61 substances with multiple LD<sub>50</sub> values had maximum:minimum LD<sub>50</sub> values higher than that reported by Hunter et al. (1979). Three of the reference substances: triethylenemelamine, parathion, and busulfan, were in the lowest LD<sub>50</sub> (i.e., highest toxicity categories). Hunter et al. (1979) also observed that the largest variation was associated with the most toxic substances.

## 4.5 Summary

*In vivo* reference data for comparison with the *in vitro* NRU cytotoxicity data for the 72 substances were determined by analyzing rodent LD<sub>50</sub> values identified by literature searches and secondary references. Rat LD<sub>50</sub> values were preferred, but when rat data could not be located for three substances, mouse LD<sub>50</sub> values were used. The 491 LD<sub>50</sub> values located consisted of 485 rat oral LD<sub>50</sub> values and six mouse oral LD<sub>50</sub> values. Identifying a high quality data set determined under GLP guidelines was not possible since only 3% of the data

records were in compliance. Instead, a homogenous set of LD<sub>50</sub> values for each substance was identified by excluding studies that employed the following materials and methods:

- feral rats
- rats < 4 weeks of age
- anesthetized rats
- test chemical administered in food or capsule
- LD<sub>50</sub> reported as a range or inequality

After analyzing the remaining acceptable data for outliers, the remaining values were used to determine *in vivo* reference values by calculating a geometric mean of the values for each reference substance. The reference LD<sub>50</sub> values for 20 substances varied enough from the initial LD<sub>50</sub> values, which came from the RC and other summary sources, that the substances were classified into different GHS oral toxicity categories.

Since there is no reference test for the rodent oral LD<sub>50</sub>, the accuracy of the reference values for predicting the oral LD<sub>50</sub> in humans could not be determined. The reliability of the reference values was assessed by comparison to other evaluations of the performance of the *in vivo* acute oral toxicity tests. Although the correlation of the reference values for the RC chemicals with the RC LD<sub>50</sub> was high ( $r_s = 0.97$ ), the reference LD<sub>50</sub> values tended to be higher than the RC values. The maximum:minimum ratio of the acceptable values for the reference substances that had more than one LD<sub>50</sub> value ranged from 1.1 to 25.9. The maximum:minimum ratios for four chemicals were greater than one order of magnitude.

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## 5.0 3T3 AND NHK NRU TEST METHOD DATA AND RESULTS

This section presents *in vitro* IC<sub>50</sub> data generated by testing coded reference substances using the 3T3 and NHK NRU test method protocols. These IC<sub>50</sub> values were used to evaluate the accuracy (also known as concordance)(see **Section 6**) and reliability (interlaboratory repeatability and reproducibility, intralaboratory reproducibility) (see **Section 7**) of these two *in vitro* cytotoxicity test methods. **Section 5.1** summarizes protocol modifications and revisions for each sequential phase of the validation study and examines whether such changes affected the data. **Section 5.2** provides the data used for assessing the accuracy and reliability of the 3T3 and NHK NRU protocols with a focus on PC data. **Section 5.3** summarizes the statistical approaches used for data evaluation and **Section 5.4** provides summaries of the acceptable 3T3 and NHK NRU test data for each reference substance (average IC<sub>50</sub> for each laboratory/test method). **Section 5.5** describes the “lot-to-lot” consistency of the reference substances and adherence to GLP guidelines. **Section 5.6** provides the study timeline, **Section 5.7** describes availability of test data, and **Section 5.8** presents the solubility test data. The individual test data for both passing and failing tests (EXCEL<sup>®</sup> and PRISM<sup>®</sup> files) and summary spreadsheets are available on compact disk(s). Laboratory reports are also available on compact disk(s).

### 5.1 3T3 and NHK NRU Test Method Protocols

The protocols for the 3T3 and NHK NRU test methods used during Phase III laboratory testing phase are a result of modifications and revisions of the *Guidance Document* (ICCVAM 2001b) protocols and the optimization of the protocols used in the laboratory evaluation phases (Phases Ia and Ib) and the laboratory qualification phase (Phase II). **Figure 1-2** provides an outline of the study phases, as well as identifying where repeated observations were carried out to permit protocol evaluation and comparison. The following sections address the modifications of the protocols used in each phase and how those modifications affected each data set (**Section 2** details the similarities and differences between the two test method protocols).

### 5.1.1 Phase Ia: Laboratory Evaluation Phase

During Phase Ia, each testing laboratory established an historical database for the positive control chemical, sodium lauryl sulfate (SLS). No reference substances were tested in this phase. Ten concentration-response experiments were performed, with no more than two experiments/day, and the resulting data were used to calculate the acceptable response limits for use in Phase Ib testing.

**Section 2.6.1** summarizes issues that occurred during this phase and addresses protocol changes made after the initiation of Phase Ia. The specific changes for both protocols are summarized here along with the impact the change had on the test data. Changes made in the protocols during Phase Ia were included in the Phase Ib protocols.

#### Protocol Changes and Impact on the Data

- *NR Dye Crystals*: Reduced the NR dye concentration for both cell types. No subsequent tests failed due to NR crystal formation and no apparent impact on the data was detected.
- *3T3 Cell Growth*: Modified cell culture conditions for 3T3 cells to improve cell growth characteristics. No apparent impact on the data was detected.
- *NHK Cell Growth (96-well plates)*: Removed the cell culture-refeeding step performed prior to the reference substance application. SLS IC<sub>50</sub> data were similar whether the cells were refed or not refed. The change in the protocol did not produce any observable impact on the data.
- *NHK Cell Growth (in culture flasks)*: FAL coated the culture flasks with fibronectin-collagen prior to seeding thawed cells. No apparent impact on data was detected.
- *OD Limits*: Eliminated the VC OD value range. The SMT accepted data from tests that were out of the OD range if all other criteria were met. Test data were not adversely affected by relaxing this criterion.
- *Dilution Factor*: The SMT accepted data generated using dilution factors other than the recommended 1.47 for definitive tests if all other test acceptance criteria were met. The use of smaller dilution factors generally increased the

number of points between 10 - 90% viability and the precision of the IC<sub>50</sub> calculation was improved.

#### 5.1.2 Phase Ib: Laboratory Evaluation Phase

The purpose of Phase Ib was to determine whether the protocol revisions from Phase Ia were effective in improving intra- and inter-laboratory reproducibility and to determine whether the laboratories could obtain reproducible results when testing coded reference substances of various toxicities. Three coded reference substances representing the full range of toxicity were tested in Phase Ib: arsenic trioxide (high toxicity), propranolol (medium toxicity), and ethylene glycol (low toxicity). Since Phase Ib was still part of the laboratory evaluation phase, the SMT decided that testing just three substances was sufficient and the substances did not need to represent all GHS toxicity categories. Each substance was tested at least once in a range finding experiment and then in three acceptable definitive tests performed on three different days.

**Section 2.6.2** summarizes the technical challenges that arose during this phase and addresses protocol changes made after initiation of Phase Ib. This section (**5.1.2**) describes the specific changes for the 3T3 and NHK NRU protocols along with the impact the changes had on the test data.

#### *Protocol Changes and Impact on the Data*

- *NR Dye Crystals*: Reduced the concentration of NR in the 3T3 test method. The OD values and SLS IC<sub>50</sub> data were similar in four exploratory experiments regardless of the NR concentration or the NRU incubation time tested. The elimination of NRU crystals reduced the background OD values.
- *OD Range*: Used new OD ranges only for guidance (e.g., target values to assess adequate cell growth) for the remainder of the study. This increased the number of tests that met the acceptance criteria. Data were not adversely affected by the removal of this criterion.
- *SLS IC<sub>50</sub> Range*: Expanded the acceptance criterion range for the SLS IC<sub>50</sub>. This allowed additional positive control tests to meet the acceptance criteria and

thereby qualifying additional definitive tests as acceptable since they would meet acceptance criteria and not fail simply because the PC failed.

### 5.1.3 Phase II: Laboratory Qualification Phase

The results of Phase II determined whether the protocol revisions from Phase Ib were effective in improving intra- and inter-laboratory reproducibility and whether the laboratories could obtain reproducible results when testing a larger set of substances covering a wider range of physical/chemical characteristics and toxicities than tested in Phase Ib. Nine coded reference substances were analyzed: aminopterin, cadmium chloride, chloramphenicol, colchicine, lithium carbonate, potassium chloride, 2-propanol, sodium fluoride, and sodium selenate. These substances were common to the RC (with the exception of sodium selenate) and were chosen because they fit the RC millimole regression line (i.e., were within the acceptance intervals of the regression line). The RC is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for chemicals with known molecular weights (Halle 1998). Sodium selenate, the non-RC chemical, was chosen because of its high toxicity. Besides aminopterin, there were no other reference substances in the highest toxicity category that were within the RC millimole regression acceptance intervals. Each substance was tested at least once in a range finding experiment and then in three acceptable definitive tests performed on different days during this phase.

**Sections 2.6.2 and 2.6.3** summarize the technical issues that arose during this phase and address NRU protocol changes made prior to Phase II. This section (**5.1.3**) describes the additional changes for both 3T3 and NHK NRU protocols along with the impact the changes had on the test data.

#### *Protocol Changes and Impact on the Data*

- *Blank Wells*: Added reference substance to blank wells of the test plate. There was no apparent impact on test data.
- *VC OD Range*: Eliminated the VC OD range as an acceptance criterion. There was no apparent impact on test data.

- *Harmonization of Laboratory Techniques*: Made revisions to the Phase II protocols as a result of the harmonization training by the testing laboratories (see **Section 2.6.2**). There was no apparent impact on test data for IIVS and ECBC but FAL data quality was improved.
- *3T3 Cell Seeding Density*: Added a range of cell seeding densities to be used by the laboratories. No apparent impact on data was detected during this phase.
- *NHK Cell Growth from Cryopreservation*: Eliminated the use of fibronectin-collagen coating and 80-cm<sup>2</sup> flasks for initial propagation of NHK cells. FAL achieved better cell growth, obtained lower IC<sub>50</sub> values for the PC, and achieved better agreement of the mean SLS IC<sub>50</sub> values compared to the other laboratories.
- *Volatile Substances*: Added CO<sub>2</sub> permeable plate sealer use for control of volatility in subsequent experiments (identified by cross contamination of the control wells). The use of plate sealers for volatile substances was incorporated into the Phase III protocols.
- *Hill Function*: Relaxed the Hill function criteria. Some tests that did not meet the original criterion were accepted by the SMT after determining that even though the curve fit was not optimum, the curve adequately conveyed the toxicity of the substance.
- *Unusual Dose Response*: Revised the Hill function calculation to address substances that produced a dose-response for which toxicity plateaued before reaching 0% viability. This allowed for calculation of a more precise IC<sub>50</sub> value for such substances.
- *Positive Control IC<sub>50</sub> Range*: Expanded the SLS IC<sub>50</sub> acceptable range, which resulted in additional tests in Phase II being acceptable. Expanding the PC range reduced the number of retests of reference substances and thereby qualifying additional definitive tests as acceptable since they would meet acceptance criteria and not fail simply because the PC failed.

#### 5.1.4 Phase III: Main Validation Phase

The purpose of Phase III was to generate high quality *in vitro* cytotoxicity data using the 3T3 and NHK NRU test methods with optimized test method protocols. Sixty coded reference substances were tested (see **Table 5-3**); 46 of these were RC chemicals that covered a broad range of toxicity. The substances in Phase III spanned all five GHS toxicity categories and included unclassified substances. Each substance was tested at least once in a range finding experiment and then in three acceptable definitive tests performed on different days. **Tables 5-3 and 5-4** provide summary data for the Phase III substances.

**Section 2.6.4** addresses protocol changes made before initiation of Phase III. This section (**5.1.4**) describes the specific changes for both 3T3 and NHK NRU protocols along with the impact the changes made on the test data.

- *Prequalification of NHK Culture Medium*: Included a protocol for prequalifying NHK culture medium and supplements. This prevented the participating laboratories from using medium and supplements that did not provide adequate growth characteristics for NHK cells.
- *Stopping Rule for Testing*: Added this rule for chemicals that were insoluble (i.e., solubility < 200 µg/mL) or could not achieve adequate toxicity over the concentration range tested; this rule allowed testing to end for chemicals that produced no IC<sub>50</sub> data within three definitive tests. Chemicals that could not be adequately tested by one or more laboratories are presented in **Table 5-1**. In all three laboratories, carbon tetrachloride could not be adequately tested in either 3T3 or NHK cells while methanol could not be adequately tested in 3T3 cells.
- *Acceptable Range for Dose-Response Data Points*: Modified the test acceptance criterion for the number of data points required on the toxicity curve. Changed from requiring a minimum of two points (at least one point > 0% and ≤ 50% viability and at least one point > 50% and < 100% viability) to one point > 0% and < 100% viability if the smallest practical dilution factor was used (i.e., 1.21) and all other test acceptance criteria were met. This reduced the number of failed experiments without reducing the quality of the IC<sub>50</sub> data.



- *R<sup>2</sup> Acceptance Criteria*: Rescinded the R<sup>2</sup> criterion for the fit of the Hill function. The SMT determined that the R<sup>2</sup> criterion was best used to characterize the reference chemical response curve shape rather than to establish a criterion for test acceptability. This reduced the number of failed experiments without reducing the quality of the IC<sub>50</sub> data.
- *PC Acceptance Criteria*: Modified the PC acceptance criterion for Hill function fit.
- *Hill Function Analysis*: Altered the PRISM<sup>®</sup> template for the Hill function analysis to perform calculations for IC<sub>x</sub> values in two ways: (1) constraining Bottom parameter to zero and (2) fitting the Bottom parameter. As a result of the changes and efforts by the laboratories to use dilution schemes that captured the entire dose-response, very few tests in Phase III had R<sup>2</sup> < 0.9.
- *Biphasic Dose Response*: This aspect was added to the Phase III protocol so that the Study Directors could make a decision about analyzing data from reference substances with biphasic dose-responses (See **Section 2.6.3**).

**Table 5-1 Reference Substances Affected by Stopping Rule**

Reference Substance <sup>1</sup>	Testing Stopped -- No Data					
	3T3 NRU Test Method			NHK NRU Test Method		
	ECBC	FAL	IIVS	ECBC	FAL	IIVS
Carbon tetrachloride	X	X	X	X	X	X
Disulfoton		X				
Gibberellic acid		X				
Methanol	X	X	X	X		
1,1,1-Trichloroethane	X				X	X
Valproic acid			X			
Xylene	X	X		X	X	

<sup>1</sup>Substances that did not provide adequate cytotoxicity  
 ECBC: Edgewood Chemical Biological Center  
 FAL: FRAME Alternatives Laboratory  
 IIVS: Institute for In Vitro Sciences

## 5.2 Data Obtained to Evaluate Accuracy and Reliability

This section first presents the acceptable PC data from each laboratory for each phase of the validation study and then presents the reference substance data for each phase. All test data, both acceptable and unacceptable, are available on compact disk upon request. Accuracy

(concordance) and reliability assessments are provided in **Section 6** and **Section 7**, respectively.

#### 5.2.1 PC Data

A summary of the acceptable SLS IC<sub>50</sub> data used to calculate quality control acceptance limits for each experiment, by laboratory, to use in subsequent study phases, are shown in **Table 5-2**.

##### *Phase Ib Acceptance Limits*

The acceptance limits for the SLS IC<sub>50</sub> for Phase Ib testing were calculated using the Phase Ia data. The data sets from each laboratory were examined for outliers using the method of Massey and Dixon (1981), but none were identified. The acceptance limits for the SLS IC<sub>50</sub> values for each laboratory and test method were mean  $\pm$  2 SD since the SD is more commonly used as a range than the 95% confidence limits.

##### *Phase II Acceptance Limits*

The IC<sub>50</sub> values from the SLS tests from Phases Ia and Ib were used to calculate laboratory-specific and test method-specific quality control acceptance limits for Phase II. Phase Ib tests with SLS IC<sub>50</sub> values outside of the acceptance limits were considered acceptable if they met all other test acceptance criteria. For any day during which there was more than one SLS test (for each test method and laboratory), the IC<sub>50</sub> values were averaged to better reflect day-to-day variation and avoid overweighting the overall mean with values from an individual day. Extreme values were tested and removed if they were outliers at the 99% level and the remaining values were used to calculate the mean  $\pm$  2.5 SD as the acceptance limits. The acceptance limits were expanded from 2 SD in Phase Ib to 2.5 SD for Phase II to allow for the fact that the limits tend to get narrower as more data are collected.

297 **Table 5-2 Positive Control (SLS) Data by Phase**

Study Phase	ECBC				FAL				IIVS			
	Mean IC50 (µg/mL)	Standard Deviation (µg/mL)	Acceptance Limits	N	Mean IC50 (µg/mL)	Standard Deviation (µg/mL)	Acceptance Limits	N	Mean IC50 (µg/mL)	Standard Deviation (µg/mL)	Acceptance Limits	N
<b>3T3</b>												
Ia <sup>1</sup>	38.3	4.71	28.8 – 47.7	15	42.3	8.56	25.2 – 59.5	25	40.9	3.19	34.5 – 47.3	12
Ib <sup>2</sup>	41.3	5.99	26.4 – 56.3	12	43.2	4.68	31.5 – 54.9	17	42.1	3.40	33.6 – 50.6	13
II <sup>3</sup>	41.2	4.20	30.8 – 51.6	29	45.9	7.50	27.2 – 64.7	36	40.6	3.50	31.8 – 49.3	21
III <sup>4</sup>	41.6	3.41	NA	65	41.1	6.23	NA	26	41.5	3.74	NA	22
<b>NHK</b>												
Ia <sup>1</sup>	4.03	1.32	1.40 – 6.67	15	7.45	3.07	1.34 – 13.6	18	3.68	0.555	2.57 – 4.79	30
Ib <sup>2</sup>	3.65	0.98	1.22 – 6.10	11	5.35	2.32	0 <sup>a</sup> – 11.1	15	3.57	0.59	2.10 – 5.04	17
II <sup>3</sup>	3.59	1.41	0.07 – 7.11	22	3.20	1.05	0.57 – 5.82	15	3.78	0.73	1.94 – 5.61	26
III <sup>4</sup>	3.03	0.75	NA	57	3.45	0.90	NA	35	3.12	0.53	NA	20

<sup>1</sup>Values generated from Phase Ia data for PC acceptance criterion for Phase Ib; Acceptance limits = Mean ± 2 X standard deviation

<sup>2</sup>Values generated from Phases Ia and Ib data for PC acceptance criterion for Phase II; Acceptance limits = Mean ± 2.5 X standard deviation

<sup>3</sup>Values generated from Phases Ia, Ib, and II data for PC acceptance criterion for Phase III; Acceptance limits = Mean ± 2.5 X standard deviation

<sup>4</sup>Values generated from Phase III data.

<sup>a</sup>Calculation of lower limits actually yielded negative concentrations, so lower limit was placed at 0 and later revised to 0.1 µg/mL

NA = not applicable

ECBC: Edgewood Chemical Biological Center

FAL: FRAME Alternatives Laboratory

IIVS: Institute for In Vitro Sciences

### Phase III Acceptance Limits

The IC<sub>50</sub> values from the SLS tests from Phases I and II were used to calculate laboratory-specific and test method-specific quality control acceptance limits for Phase III. The SLS IC<sub>50</sub> values outside of the acceptance limits were considered acceptable if the tests met all other test acceptance criteria. For any day for which there was more than one SLS test (for each test method and laboratory), the IC<sub>50</sub> values were averaged to better reflect day-to-day variation and avoid overweighting the overall mean with values from an individual day. ANOVA was used to compare the Phase Ia, Ib and II data within each laboratory. For phases that were not significantly different at  $p < 0.05$ , the IC<sub>50</sub> data were used to calculate the mean  $\pm 2.5$  SD as the acceptance limits for Phase III. The only laboratory/test method that showed a significant difference between the phases was FAL using the NHK NRU test method ( $p < 0.0002$ ). The difference was attributed to the changes in cell culture practices between Phases Ib and II (see **Section 5.1.3**). Thus, for the NHK data at FAL, only the Phase II SLS IC<sub>50</sub> values were used to calculate the acceptance limits for Phase III.

The IC<sub>50</sub> values from the SLS tests from Phase III are also presented in **Table 5-2**.

#### 5.2.2 Reference Substance Data

All reference substance data from all laboratories are presented in **Appendix I. Tables 5-3, 5-4, and 5-5** and **Figures 5-1 a-f (3T3) and 5-2 a-f (NHK)** provide summary data for all phases of the NICEATM/ECVAM validation study (see **Section 5.4**).

### 5.3 Statistical Approaches to the Evaluation of 3T3 and NHK NRU Data

Statistical approaches to data evaluation are reviewed in the following sections for each phase of the NICEATM/ECVAM validation study. **Section 2.2.3** discusses the endpoint measurements for the 3T3 and NHK NRU test methods. The mean OD values of the six replicate values (six wells [minimum of four] in the 96-well plate) per test concentration (eight concentrations/reference substance or PC) are used to determine relative cell viability by calculating the specific concentration's percentage of the mean NRU of all VC values on the same plate. The mean cell viability values generated from replicate wells for each

concentration are used to plot a toxicity curve (percent viability versus concentration) and the  $IC_{50}$  value is determined from that curve.

### 5.3.1 Statistical Analyses for Phase Ia

The laboratories reported the  $IC_{50}$  results for SLS in  $\mu\text{g/mL}$ . The SMT used the results from the acceptable tests to calculate means and SDs for each test method at each laboratory.

#### *Outlier Determination for Replicate Well Concentration Data*

During a review of the six replicate well OD data for the same concentration of a reference substance, it was noted that extreme OD values sometimes occurred and that removal of these “outlier values” frequently improved the fit of the Hill function for the concentration cytotoxicity response curve. Concern was expressed that the outliers, if not excluded, may create so much noise that the true cytotoxicity response might be obscured although there was no discernable experimental reason for the outliers. Although it was recognized that removal of extreme values reduced reported variability and might have altered the mean value, an outlier test from Dixon and Massey (1981) was used to evaluate the consistency of replicate well data. The SMT manually applied the outlier test to the Phase Ia data when apparent extreme values were noted. If the extreme value was an outlier at the 99% level, it was excluded from the data set, and the  $IC_{50}$  was recalculated. All data are available in the data files provided by the laboratories, including the OD values in the excluded outlier value wells. The protocol acceptance requirement of a minimum of four test wells per reference substance concentration remained in effect.

#### *Curve Fit Criterion*

Upon visual review of the fit of the OD data to the Hill function curve, a curve fit criterion was implemented as a test acceptance criterion. The SMT considered the fit of the concentration-response curve to the Hill function to be acceptable when  $R^2 > 0.9$ . If  $R^2 < 0.8$ , then the fit was unacceptable and the data for that test was rejected. Curves with a fit of  $0.8 < R^2 < 0.9$  were evaluated visually (for goodness of fit) and accepted if the SMT concluded that there were sufficient data points between 0 and 100% cytotoxicity and a reasonable shape to the curve to calculate a reasonably accurate  $IC_{50}$ . Each test with a curve

fit in this range was analyzed individually (i.e., on a case-by-case basis) and no standard criterion was developed to pass/fail such results. [Note: The use of  $R^2$  was reevaluated in Phases Ib and II and was eliminated as a test acceptance criterion for Phase III reference substances. An  $R^2$  value  $\geq 0.85$  was maintained as a test acceptance criterion for the PC.] The  $R^2$  criterion was implemented approximately two months after the laboratories completed Phase Ia testing.

#### *Reproducibility Analyses for PC IC<sub>50</sub> Values*

To evaluate reproducibility of the IC<sub>50</sub> values for the PC for each test method, within and between the laboratories, the SMT considered using the American Society of Testing and Materials (ASTM) Standard E691-99, Standard Practice for Conducting an Interlaboratory Study to Determine the Precision of a Test Method (ASTM 1999). This method uses two statistics, h and k, to judge the consistency of means and variances between laboratories. Since a minimum of six laboratories is required for this type of analysis, the SMT decided that it could not be appropriately applied to three laboratories.

Therefore, the variability of the IC<sub>50</sub> data obtained for each test method and laboratory for the PC was assessed using CV analysis and one-way analysis of variance (ANOVA). The CV was calculated by dividing the SD by the arithmetic mean IC<sub>50</sub> value and then multiplying by 100. CV values were calculated for the acceptable tests within each laboratory. To compare the variation among laboratories, CV was calculated from the mean IC<sub>50</sub> values from each laboratory. Although no criterion for acceptable CV was determined for this study, ECVAM has recently used CV < 30% as an acceptable CV range for both intra- and inter-laboratory reproducibility (Zuang et al. 2002; Fentem et al. 2001). ECVAM usually applies the criterion to the mean CV for all substances tested during the same phase. Although this CV range is intended to reflect an acceptable maximum for normal biological variability, the range is not supported by data.

For the ANOVA, IC<sub>50</sub> values were first converted to mM units and then log-transformed to obtain normal distributions. One-way ANOVA was performed with SAS PROC GLM (SAS Institute 1999; see **Appendix R1** for example SAS code). To be conservative with respect to

identifying laboratory differences, a significance level of  $p < 0.01$  was used to test results between the laboratories.

### 5.3.2 Statistical Analyses for Phase Ib

#### *Outlier Determination for Replicate Well Concentration Data*

For consistency of replicate well concentration data, the SMT applied the same outlier test used for the Phase Ia data (Dixon and Massey 1981) when extreme OD values were noted. If the extreme value was an outlier at the 99% level, it was excluded from the data set, and the  $IC_{50}$  was recalculated. All data are available in the data files provided by the laboratories, including the OD values in the excluded outlier value wells.

#### *Reproducibility Analyses for the Reference Substance $IC_{50}$ Values*

A one-way ANOVA and CV analyses were used to assess test method reproducibility within and across laboratories were performed as described in **Section 5.3.1**. When the ANOVA detected significant differences among the laboratories ( $p < 0.01$ ), contrast analyses were performed to determine which laboratory was different from the others. The contrasts compared the results of each laboratory with those of the other two laboratories. A significant difference among the laboratories was indicated by  $p < 0.01$ .

### 5.3.3 Statistical Analyses for Phase II

#### *Outlier Determination for Replicate Well Concentration Data*

For consistency of replicate well concentration data, the outlier test from Dixon and Massey (1981) was incorporated into the EXCEL<sup>®</sup> templates used by the laboratories to collect and report data. Extreme values that were outliers at the 99% level were highlighted and the Study Director was offered the option of removing the value from subsequent calculations (for mean OD of the six replicates, % viability,  $IC_{50}$ , etc.).

#### *Reproducibility Analyses for Reference Substance $IC_{50}$ Values*

CV values from the acceptable tests were used to calculate mean, SD, and CV for each substance/test method/laboratory as described in **Section 5.3.2**. Intra- and inter-laboratory

reproducibility of IC<sub>50</sub> data, by test method, for the reference substances tested in Phases II was also assessed using one-way ANOVA as described in **Section 5.3.2**.

#### *Comparison of 3T3 and NHK NRU Test Results to the RC Millimole Regression*

To compare the 3T3 and NHK NRU test results for the reference substances to those of the RC millimole regression, the IC<sub>50</sub> values reported by the laboratories were transformed to mM units for the calculation of geometric mean IC<sub>50</sub> values for each substance/test method/laboratory. The log geometric mean IC<sub>50</sub> values were used with the RC LD<sub>50</sub> values (see **Table 3-2**), after transformation to log mmol/kg units (see **Appendices J1** and **J3**), to calculate least squares linear regressions for each test method and laboratory. Each of these regressions was compared to the RC millimole regression using an F test with SAS PROC REG (SAS Institute 1999; see **Appendix R2** for example SAS code). An F test with a significance level of  $p < 0.01$  was used to determine whether the joint comparison of slope and intercept indicated that the laboratory regressions were significantly different from the RC millimole regression.

#### **5.3.4    Statistical Analyses for Phase III**

##### *Outlier Determination for Replicate Well Concentration Data*

The laboratories used the outlier test at the 99% level (Dixon and Massey 1981) incorporated into the EXCEL<sup>®</sup> templates to test for outlier values among replicate well concentration data. The Study Director had the option of excluding the outliers from the data set, which were highlighted by the template, from subsequent calculations. All data are available in the data files provided by the laboratories, including the OD values in the excluded outlier value wells.

##### *Reproducibility Analyses for the PC Data*

A number of analyses were performed to determine whether the SLS IC<sub>50</sub> values were reproducible over the duration of the study (i.e., across study phases). The SLS IC<sub>50</sub> values used to assess variability were somewhat different from those shown in **Table 5-2**. To get an assessment of the true variation of SLS IC<sub>50</sub> values, the reproducibility analyses included IC<sub>50</sub> values from SLS tests that failed the test acceptance criterion for the IC<sub>50</sub> acceptance



limits in **Table 5-2** that were determined for each laboratory and study phase. These SLS tests, however, passed all other test acceptance criteria. If more than one SLS test was performed in a single day (for each test method and laboratory), the IC<sub>50</sub> values were averaged to determine a single IC<sub>50</sub> for the day so that multiple results from a single day would not overly influence the average for each phase. CV analyses were performed as described in **Section 5.3.1** using the arithmetic mean IC<sub>50</sub> values for each test method, laboratory, and study phase.

For the remaining analyses of reproducibility, the IC<sub>50</sub> values were first log-transformed to obtain normal distributions. One-way ANOVAs were performed with SAS PROC GLM (SAS Institute 1999; see **Appendix R1** for example SAS code) for each test method using study phase and laboratory individually as explanatory variables. A significance level of  $p < 0.01$  was used to test for a statistical difference among the laboratory and/or phase results. To determine whether there was a linear time trend for the SLS IC<sub>50</sub> data, linear regression analyses using a least squares method were performed for each laboratory and test method using SAS PROC REG (SAS Institute 1999). Time was expressed as an index for each test. The index number of each test reflected its order of testing without respect to the time lapsing between tests. The slopes of the linear regressions were statistically significant if  $p < 0.05$ .

#### *Reproducibility Analyses for the Reference Substance Data*

CV and one-way ANOVA analyses were performed to assess the intra- and inter-laboratory reproducibility of the Phase III reference substance data as described in **Section 5.3.2**.

The geometric mean IC<sub>50</sub> values were used to calculate least squares linear regression models after log transforming the data. Linear regressions were fit for each test method and laboratory using the log transformed reference LD<sub>50</sub> values from **Table 4-2** in mmol/kg with log IC<sub>50</sub> in mM. To detect differences between the laboratory regressions, two models were fit for each test method. The first model was a full model that included effects for laboratory and interactions. This model generated a regression line for each laboratory. The second model, the reduced model, assumed that one model fit all the laboratories. A goodness of fit F test was performed to compare the full and reduced models for the two regressions for each

test method. A significance level of  $p < 0.05$  was used to test whether the laboratory regressions were significantly different from one another.

#### *Comparison of 3T3 and NHK NRU Test Results to the RC Regression*

The laboratory regressions for each test method were combined using the log geometric mean of the geometric mean  $IC_{50}$  values from each laboratory and the reference log transformed  $LD_{50}$  in mmol/kg. Another linear regression was calculated using the log transformed  $IC_{50}$  and  $LD_{50}$  data from the RC for the 58 RC chemicals tested in the NICEATM/ECVAM validation study. The regression for the 58 RC chemicals was compared to the combined laboratory regressions for each test method using an F test to compare slope and intercept (simultaneously). A  $p < 0.01$  was used to indicate whether the test method regressions were statistically different from the 58 chemical RC regression.

To assess accuracy of the regression models and the NRU test methods, the  $LD_{50}$  predictions of the RC millimole regression and two additional regressions developed in **Section 6.2** were used to assign predicted GHS acute oral toxicity category categories (see **Section 6.3**). Accuracy was determined by calculating the proportion of chemicals for which the predicted GHS toxicity category matched the *in vivo* GHS toxicity category. The  $LD_{50}$  predictions from these regression models were also used to determine starting doses for acute systemic toxicity test method simulations for the purpose calculating animal use and animal savings using the NRU test methods. The simulation modeling methods and results for the UDP and ATC methods are described in **Section 10**.

## **5.4 Summary of Results**

**Table 5-3** the reference substance name, chemical class (classification based on the National Library of Medicine's Medical Subject Heading [MeSH]), summary  $IC_{50}$  data (arithmetic mean), standard deviations, and the number (N) of tests used to produce the values in the study for both *in vitro* NRU cytotoxicity test methods. Data are categorized alphabetically and by phase. The reference substance data are also shown on bar graphs in **Figures 5-1 a-f** (3T3) and **5-2 a-f** (NHK) and the reference substances are ranked by  $IC_{50}$  values (lowest

value [most toxic] to highest value [least toxic]). The substances are divided into subgroups for ease of fit to the graph size. **Appendices I-1** through **I-4** provide all test data ( $IC_{50}$  values) from all laboratories for each cell type. **Tables 5-4** and **5-5** provide the geometric  $IC_{50}$  mean values for 3T3 and NHK (laboratories combined) and show the differences in the values in orders of magnitude. The correlation of the mean  $IC_{50}$  values for the 58 study reference substances common to the RC database vs the RC  $IC_{50}$  values is shown in **Figure 5-3** (3T3 NRU values) and **Figure 5-4** (NHK NRU values). **Table 5-7** contains summary data for the solubility studies performed by the laboratories. **Table 5-8** lists the reference substances that exhibited precipitate and/or volatility problems. **Appendix F** provides physical, chemical, and biological information for all 72 reference substances.

**Table 5-3 3T3 and NHK NRU Test Method Summary IC<sub>50</sub> Data from the Laboratories**

Substance	Chemical Class <sup>4</sup>	3T3 NRU Test Method									NHK NRU Test Method								
		ECBC			FAL			HVS			ECBC			FAL			HVS		
		IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N
<b>Phase Ia</b>																			
Sodium lauryl sulfate (SLS)	Alcohol	38.6	3.8	12	44.8	4.7	21	40.9	3.2	12	4.11	1.4	13	6.64	2.1	14	3.63	0.5	29
<b>Phase Ib</b>																			
Arsenic III Trioxide	Arsenical	2.41	0.782	4	1.04	0.070	4	4.09	2.23	3	7.77	2.54	4	2.55	1.92	6	20.9	6.40	3
Ethylene glycol	Alcohol	18325	1658	4	31650	7453	4	25900	3081	3	38000	4681	3	49800	4371	3	40000	5341	4
Propranolol HCl	Alcohol	13.6	4.37	4	13.5	6.85	4	17.6	3.78	3	38.3	4.54	3	43.8	2.52	3	28.6	3.28	4
<b>Phase II</b>																			
Aminopterin	Heterocyclic	0.005	0.001	3	0.012	0.005	3	0.005	0.001	3	889	182	3	545	42.2	3	611	70.7	2
Cadmium II chloride	Cadmium compound	0.480	0.066	3	0.400	0.129	3	0.817	0.427	3	2.20	0.823	5	1.88	1.22	3	1.86	0.151	3
Chloramphenicol	Alcohol	55.3	12.4	4	273	82.2	4	156	27.9	3	318	142	3	414	182	4	367	79.7	3
Colchicine	Heterocyclic	0.021	0.002	4	0.093	0.042	3	0.028	0.0003	3	0.005	0.002	3	0.008	0.001	3	0.008	0.002	3
Lithium I carbonate	Lithium compound	564	67.6	3	NA	NA	NA	NA	NA	NA	411	119	3	486	95.7	3	535	31.6	3
Potassium I chloride	Potassium, chlorine compound	3352	468	4	3842	1198	5	3710	417	3	2560	432	3	2287	631	3	1990	161	3
2-Propanol (Isopropyl alcohol)	Alcohol	2610	240	2	3970	139	3	4110	161	3	5263	583	3	4273	1139	3	7087	480	3
Sodium I fluoride	Sodium, fluorine compound	61.3	5.55	3	96.1	17.7	3	82.0	5.81	3	48.7	6.92	3	39.7	9.61	3	53.7	6.82	4

**Table 5-3 3T3 and NHK NRU Test Method Summary IC<sub>50</sub> Data from the Laboratories**

Substance	Chemical Class <sup>4</sup>	3T3 NRU Test Method									NHK NRU Test Method								
		ECBC			FAL			IIVS			ECBC			FAL			IIVS		
		IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N
Sodium selenate	Sodium, selenium compound	12.7	1.62	3	54.2	10.4	3	36.5	5.23	3	7.47	0.861	3	16.1	9.55	3	10.0	1.33	3
<b>Phase III</b>																			
Acetaminophen	Amide	40.8	9.12	3	66.2	23.0	3	43.4	11.4	3	558	80.7	3	447	83.7	3	571	79.0	3
Acetonitrile	Nitrile	6433	129	3	9690	5634	3	9330	1217	3	10868	7824	4	10153	1960	4	9290	413	3
Acetylsalicylic acid	Carboxylic Acid	646	61.5	3	1234	298	3	401	62.0	3	631	19.9	3	694	98.3	3	514	79.1	3
5-Aminosalicylic acid	Carboxylic Acid	1467	203	3	2070	334	3	1557	179	3	29.9	6.52	3	78.2	42.3	3	48.8	7.90	3
Amitriptyline HCl	Polycyclic	6.03	1.38	3	7.86	2.20	3	7.81	1.38	3	10.8	3.34	3	7.57	5.43	3	10.9	1.04	3
Atropine sulfate	Heterocyclic	54.1	29.6	3	133	41.1	3	70.0	5.7	3	85.4	10.5	3	104	88.2	3	83.2	21.0	3
Boric acid	Boron compound	1497	484	3	3987	693	3	1202	581	3	440	138	3	517	378	3	464	11.0	3
Busulfan	Alcohol	40.4	19.3	3	321	180	3	43.7	1.77	3	253	68.2	3	268	193	3	313	37.2	3
Caffeine	Heterocyclic	133	13.3	3	157	81.7	3	191	14.4	3	817	256	3	591	186	3	574	7.81	3
Carbamazepine	Heterocyclic	83.0	12.0	3	152	56.9	3	91.8	11.0	3	66.1	8.40	3	253	325	3	63.9	5.27	3
Carbon tetrachloride	Halogenated hydrocarbon	NA	NA	-	NA	NA	-	NA	NA	-	NA	NA	-	NA	NA	-	NA	NA	-
Chloral hydrate	Alcohol	151	15.6	3	241	25.1	3	170	19.9	3	140	34.2	3	159	50.1	3	112	1.73	3
Citric acid	Carboxylic acid	473	138	3	1148	143	4	865	160	3	526	82.4	3	312	51.6	4	433	22.3	3

**Table 5-3 3T3 and NHK NRU Test Method Summary IC<sub>50</sub> Data from the Laboratories**

Substance	Chemical Class <sup>4</sup>	3T3 NRU Test Method									NHK NRU Test Method								
		ECBC			FAL			IIVS			ECBC			FAL			IIVS		
		IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N
Cupric sulfate pentahydrate	Sulfur compound	82.7	3.18	3	123	54.0	4	5.72	1.75	3	190	19.6	3	195	12.5	3	207	7.09	3
Cycloheximide	Heterocyclic	0.125	0.057	3	0.647	0.451	3	0.109	0.025	3	0.053	0.012	3	0.120	0.094	3	0.071	0.013	3
Dibutyl phthalate	Carboxylic acid	23.5	3.98	3	191	94.5	4	20.7	1.37	3	28.3	7.64	3	47.4	34.3	3	22.0	1.32	3
Dichlorvos	Organophosphorous	9.83	3.42	3	32.8	2.07	3	18.3	2.09	3	8.56	2.28	3	12.4	3.74	3	12.2	0.416	3
Diethyl phthalate	Carboxylic acid	85.5	29.0	3	147	37.8	3	106	25.3	3	174	14.4	3	71.5	67.3	3	189	33.1	3
Digoxin	Polycyclic	351	137	3	892	319	3	317	67.9	2	0.0054	0.0007	3	0.0001	0.00002	3	0.0040	0.0003	3
Dimethyl-formamide	Amide	5343	515	3	5483	517	3	4900	183	3	9353	155	3	7817	100	3	6397	202	3
Diquat dibromide monohydrate	Heterocyclic	3.87	0.887	3	36.1	35.5	3	5.39	1.36	3	3.59	0.825	3	6.77	3.73	4	3.84	0.313	3
Disulfoton	Organophosphorous compound	137	74.9	3	11200	NA	1	60.4	52.5	3	140	27.0	3	808	213	3	186	59.2	3
Endosulfan	Heterocyclic	5.27	3.01	3	15.2	11.9	4	3.61	1.53	3	3.44	0.573	3	1.42	0.701	4	2.19	0.437	3
Epinephrine bitartrate	Alcohol	51.5	6.16	3	63.4	6.63	3	63.4	1.91	3	115	10.8	3	81.7	28.4	3	75.0	12.2	3
Ethanol	Alcohol	5360	1754	3	8420	1205	3	6413	345	3	8290	390	3	12013	2286	3	10250	867	3
Fenpropathrin	Hydrocarbon	22.6	2.41	3	42.4	26.8	4	16.7	2.03	3	3.73	1.01	3	2.23	0.616	3	1.82	0.310	3
Gibberellic acid	Hydrocarbon	8027	908	3	NA	NA	-	7657	745	3	2850	402	3	2940	276	3	2807	121	3

**Table 5-3 3T3 and NHK NRU Test Method Summary IC<sub>50</sub> Data from the Laboratories**

Substance	Chemical Class <sup>4</sup>	3T3 NRU Test Method									NHK NRU Test Method								
		ECBC			FAL			IIVS			ECBC			FAL			IIVS		
		IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N
Glutethimide	Heterocyclic	167	7.00	3	284	20.7	3	125	9.25	4	187	64.3	3	170	24.1	3	176	27.5	3
Glycerol	Alcohol	20000	2987	3	38878	28238	4	27833	10882	3	34267	15399	3	18023	8334	3	29033	4596	3
Haloperidol	Ketone	5.32	0.649	3	7.99	0.655	3	5.47	0.654	3	3.69	1.01	3	3.72	1.81	3	3.29	1.15	3
Hexachlorophene	Cyclic hydrocarbon	5.02	2.41	3	5.35	1.75	3	3.06	0.289	3	0.027	0.004	3	0.046	0.020	3	0.021	0.002	3
Lactic acid	Carboxylic acid	2943	315	3	3487	561	3	2790	259	3	1290	52.9	3	1320	60.8	3	1313	138	3
Lindane	Halogenated hydrocarbon	125	119	3	266	94.8	4	90.4	111	5	19.1	3.14	3	23.2	7.09	3	15.6	2.40	3
Meprobamate	Carboxylic acid	353	49.7	3	877	128	4	386	9.02	3	761	116	3	163	189	3	624	84.2	3
Mercury II chloride	Mercury compound	3.45	0.177	3	5.99	1.87	3	3.51	0.120	3	6.87	1.04	3	5.40	1.02	3	5.35	0.090	3
Methanol	Alcohol	NA	NA	-	NA	NA	-	NA	NA	-	NA	NA	-	1133	213	3	2100	226	3
Nicotine	Heterocyclic	272	65.3	3	412	136	3	450	54.7	3	94.3	24.7	3	134	78.4	3	112	27.7	3
Paraquat	Heterocyclic	21.3	7.29	3	24.9	16.5	3	23.7	15.2	3	48.3	6.03	3	96.6	37.2	3	53.4	5.52	3
Parathion	Organophosphorous compound	22.7	12.1	3	141	98.7	4	22.0	4.94	3	34.0	10.0	3	31.2	11.9	3	29.0	8.34	3
Phenobarbital	Heterocyclic	634	134	3	726	255	3	476	111	4	693	180	3	360	95.5	3	381	69.9	3
Phenol	Phenol	50.2	10.9	3	104	24.8	3	58.1	6.78	3	59.1	21.4	3	93.2	5.97	3	80.8	5.12	3

**Table 5-3 3T3 and NHK NRU Test Method Summary IC<sub>50</sub> Data from the Laboratories**

Substance	Chemical Class <sup>4</sup>	3T3 NRU Test Method									NHK NRU Test Method								
		ECBC			FAL			IIVS			ECBC			FAL			IIVS		
		IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> µg/mL	SD <sup>2</sup>	N
Phenylthiourea	Sulfur compound	30.1	19.8	3	239	65.8	3	89.0	21.9	3	363	58.0	3	401	83.6	3	272	71.7	3
Physostigmine	Carboxylic acid	28.2	14.9	3	37.8	1.93	3	20.4	6.71	4	164	5.51	3	212	238	3	139	8.74	3
Potassium cyanide	Potassium, nitrogen compound	15.3	3.76	3	159	81.9	3	18.9	0.950	3	29.3	6.90	3	89.0	100	3	16.9	2.21	3
Procainamide HCl	Amide	400	15.3	3	431	4.73	3	497	39.3	3	1480	200	3	1787	221	3	2027	229	3
Propylparaben	Carboxylic acid	20.9	3.33	3	51.8	14.8	3	17.1	2.10	3	18.1	2.42	3	18.6	2.84	3	13.8	1.21	3
Sodium arsenite	Arsenical	0.496	0.028	3	1.44	0.819	3	0.683	0.117	3	0.790	0.248	3	0.336	0.187	3	0.470	0.066	3
Sodium chloride	Sodium, chlorine compound	4790	233	3	4625	611	4	4877	457	3	3583	263	3	1118	1388	3	3470	300	3
Sodium dichromate dihydrate	Sodium, chromium compound	0.603	0.087	3	0.657	0.244	3	0.547	0.092	3	0.784	0.113	3	0.851	0.302	4	0.576	0.100	3
Sodium hypochlorite	Sodium, oxygen, chlorine compound	823	108	3	805	367	3	2005	872	4	1863	581	3	1243	576	3	1633	180	3
Sodium oxalate	Carboxylic acid	42.0	17.3	3	31.0	8.66	3	49.5	26.3	4	355	54.9	3	350	147	4	360	94.6	3
Strychnine	Heterocyclic	389	80.9	3	124	20.3	3	83.5	5.35	3	100	76.6	4	52.5	28.0	3	55.1	3.43	3
Thallium I sulfate	Metal	2.81	0.671	3	13.4	10.4	4	6.27	1.75	3	0.198	0.100	3	0.153	0.031	3	0.127	0.020	3



**Table 5-3 3T3 and NHK NRU Test Method Summary IC<sub>50</sub> Data from the Laboratories**

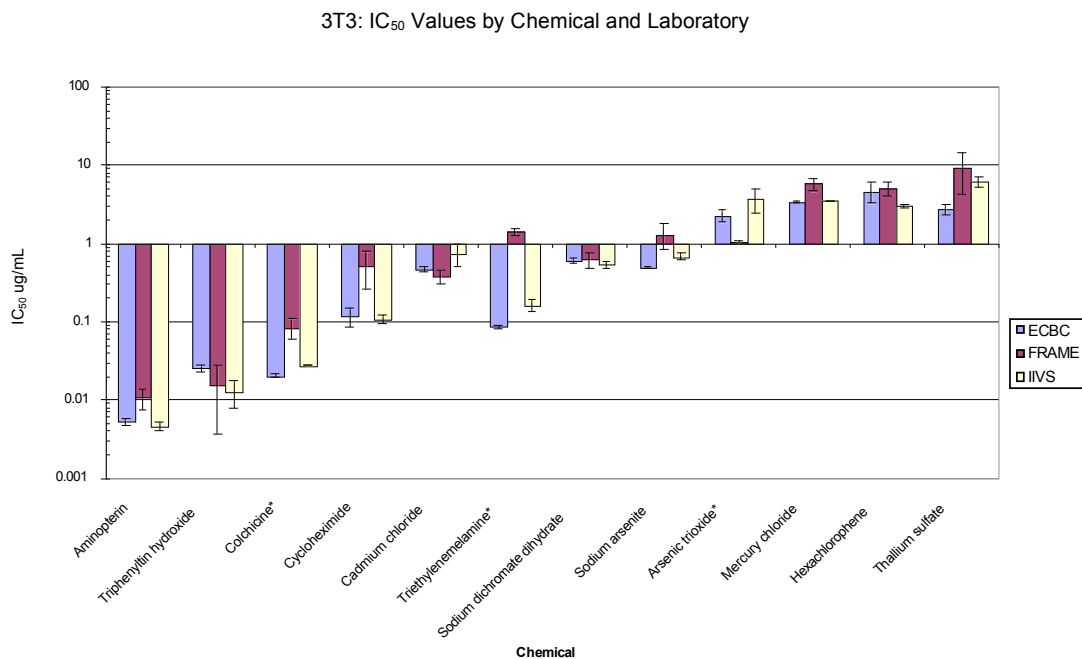
Substance	Chemical Class <sup>4</sup>	3T3 NRU Test Method									NHK NRU Test Method								
		ECBC			FAL			IIVS			ECBC			FAL			IIVS		
		IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N	IC <sub>50</sub> <sup>1</sup> μg/mL	SD <sup>2</sup>	N
Trichloroacetic acid	Carboxylic acid	762	99.1	3	1220	72.1	3	801	114	3	348	63.5	3	541	150	3	394	50.8	3
1,1,1-Trichloroethane	Halogenated hydrocarbon	41100	NA	1	21250	2357	3	9827	180	3	8137	591	3	NA	NA	-	NA	NA	-
Triethylene-melamine	Triazine	0.086	0.009	3	1.45	0.265	3	0.169	0.049	3	1.69	0.950	3	2.03	0.471	3	2.13	0.480	3
Triphenyltin hydroxide	Organo-metallic compound	0.026	0.004	3	0.026	0.021	3	0.015	0.008	3	0.021	0.007	3	0.007	0.007	3	0.011	0.003	3
Valproic acid	Carboxylic acid	547	67.1	3	1807	175	3	574	NA	1	468	116	3	702	160	3	430	71.5	3
Verapamil HCl	Amine	32.2	5.82	3	34.6	1.72	3	38.9	4.20	3	60.5	13.6	3	79.4	33.9	3	66.2	5.57	3
Xylene	Cyclic hydrocarbon	NA	NA	-	NA	NA	-	724	87.1	3	NA	NA	-	NA	NA	-	486	185	3

<sup>1</sup>Arithmetic mean<sup>2</sup>Standard deviation<sup>3</sup>Data are slightly different from that summarized in **Table 5-2** for Phase Ia. These data represent the acceptable tests after implementation of the R<sup>2</sup> acceptance criterion, while the data in **Table 5-2** represent acceptable tests prior to the implementation of the criterion.<sup>4</sup>Chemical class assigned is based on the classification of the National Library of Medicine's Medical Subject Heading (MeSH),<http://www.nlm.nih.gov/mesh/meshhome.html>NA = not available; IC<sub>50</sub> values could not be generated (see footnotes in **Appendix J**)

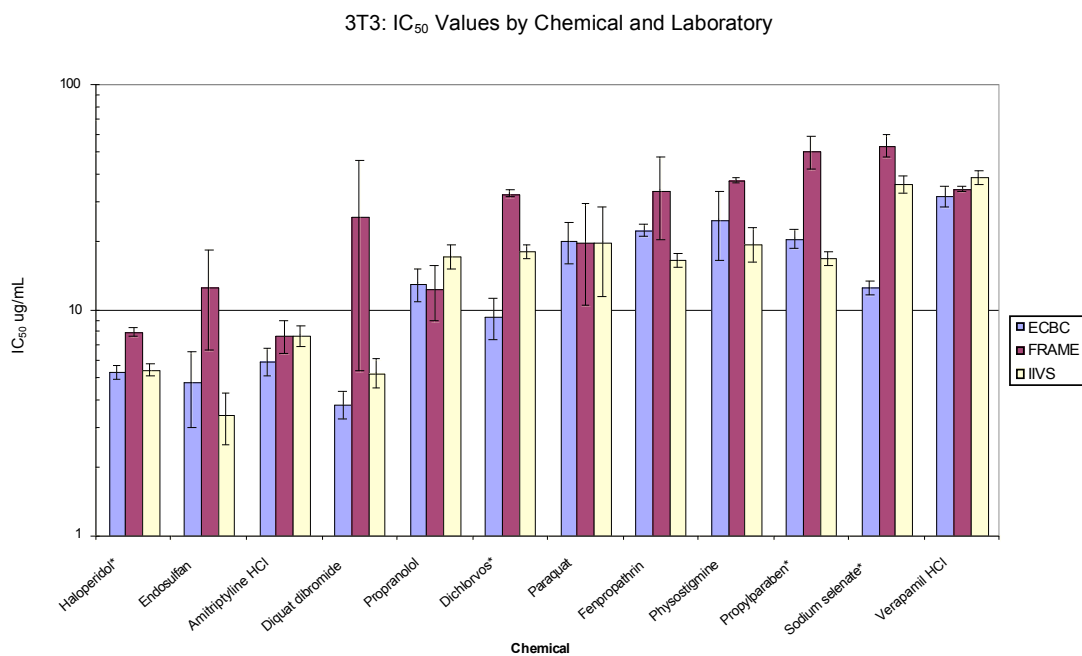
**Figure 5-1 3T3 NRU IC<sub>50</sub> Values by Reference Substance and Laboratory**

(Substances are grouped from lowest mean IC<sub>50</sub> value (aminopterin) to highest mean IC<sub>50</sub> value (ethylene glycol)).

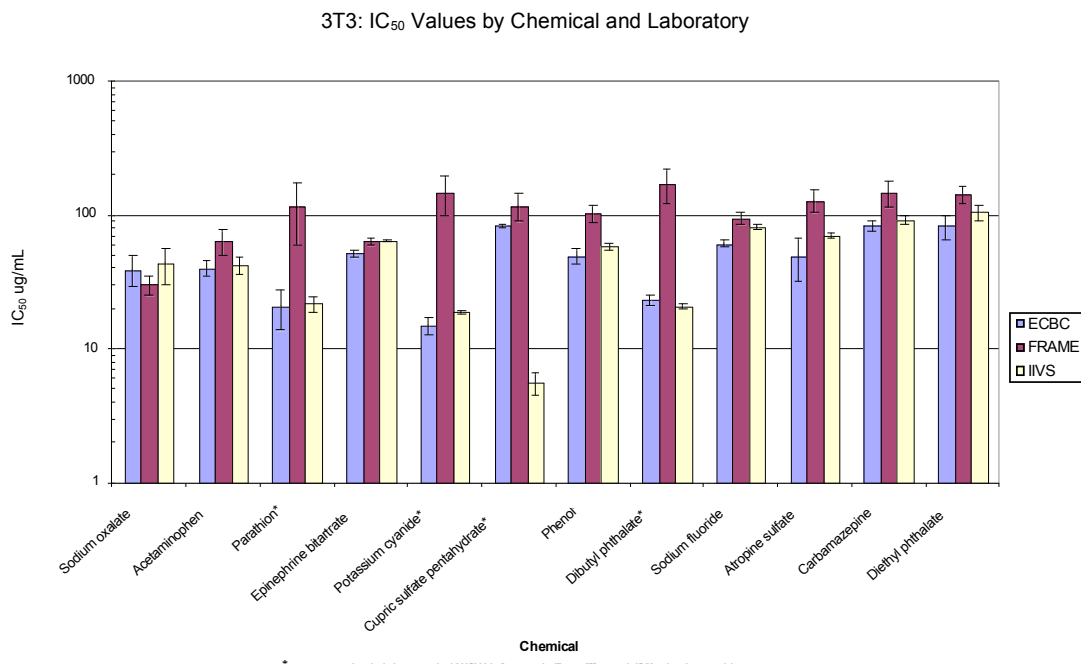
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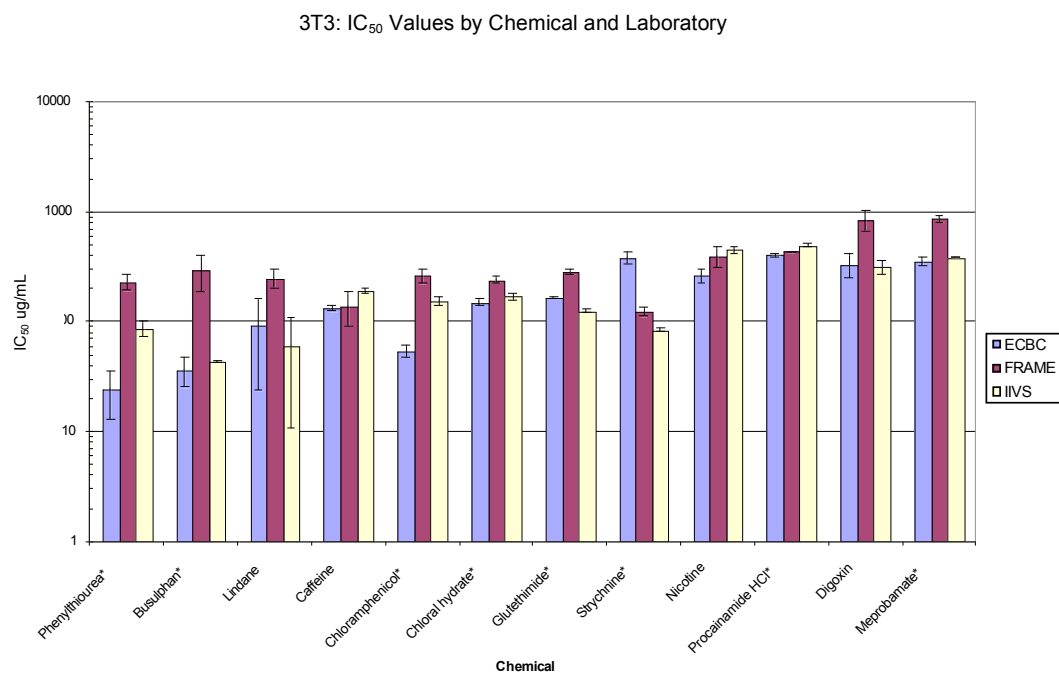
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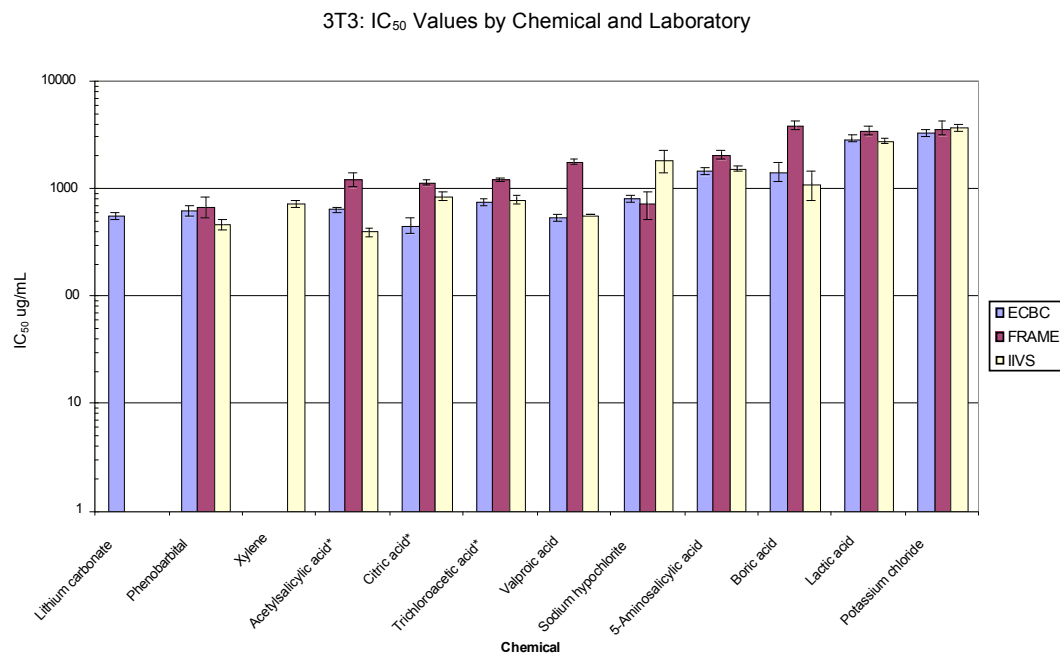


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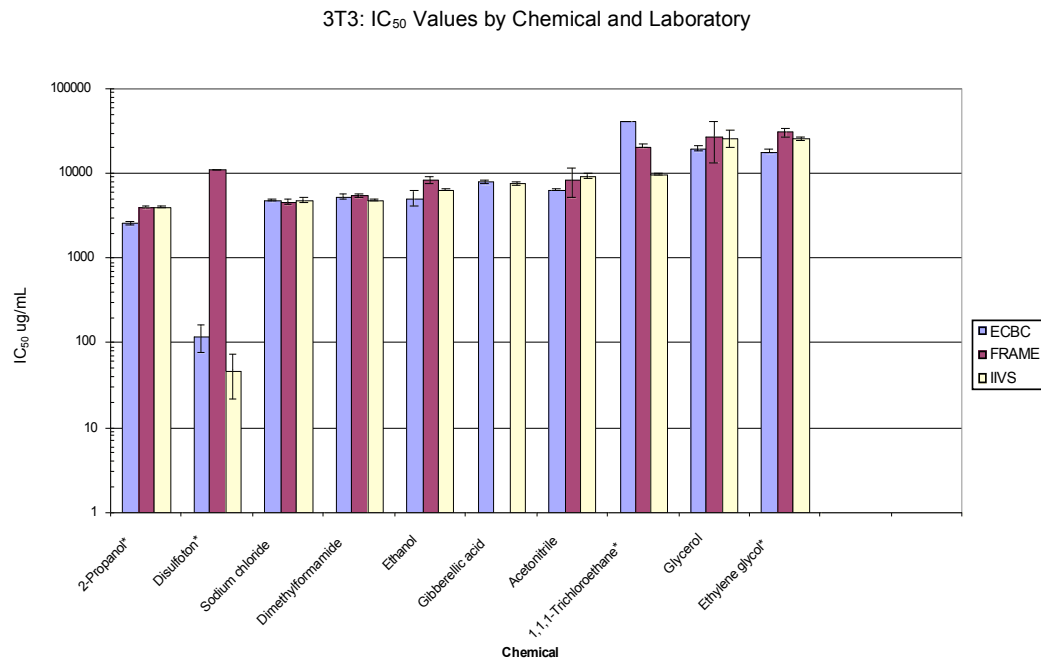


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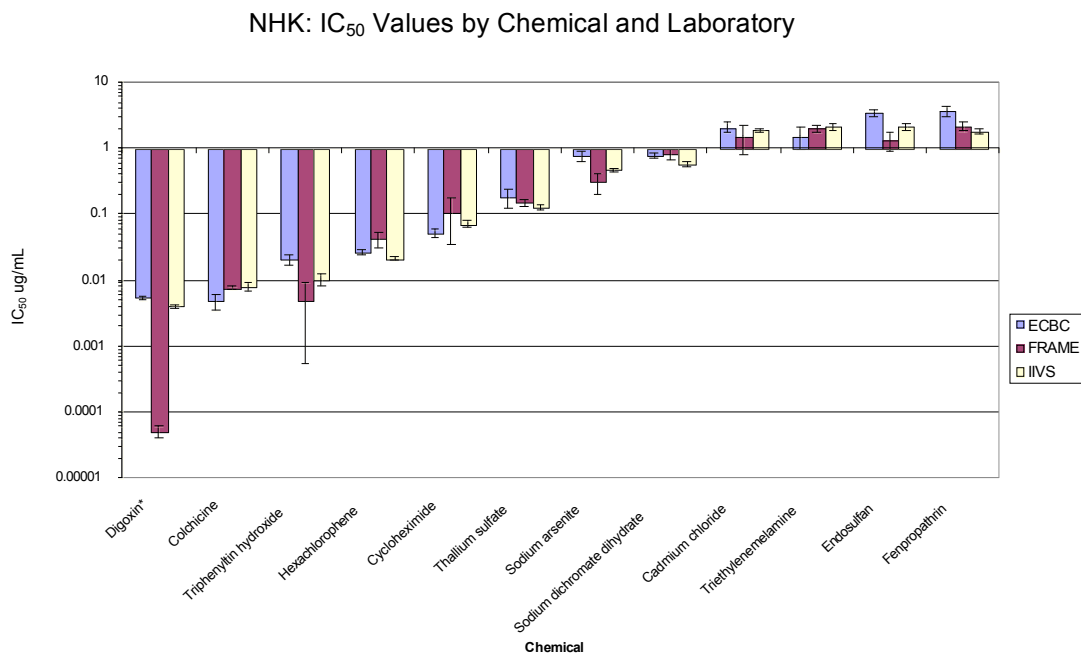
563  
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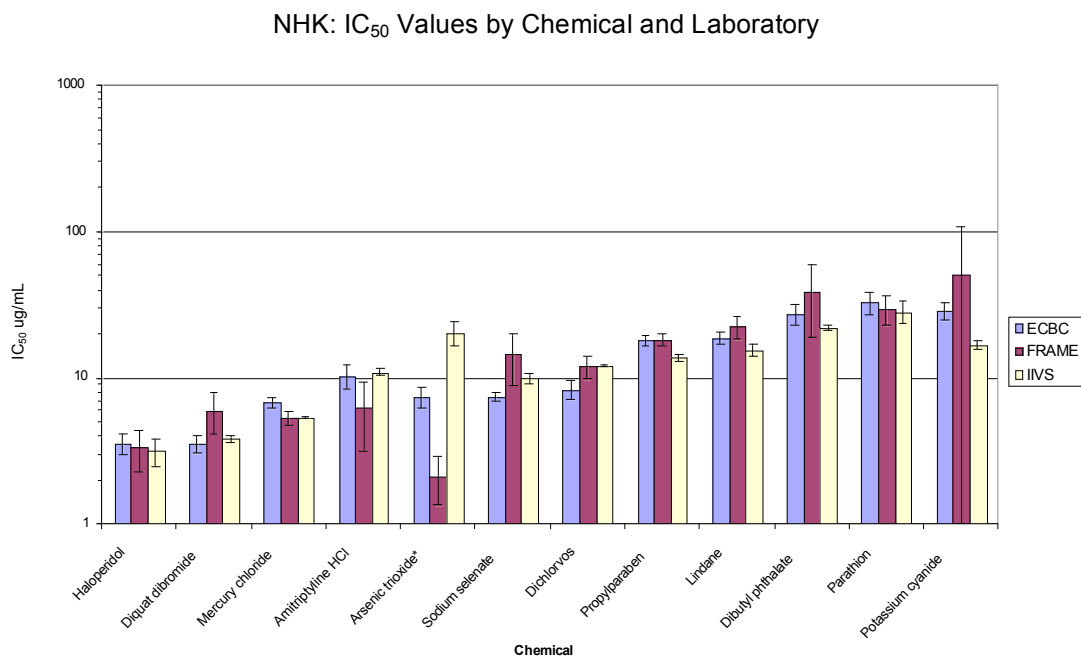
565  
566 \*Represents a chemical where the standard ANOVA indicates a significant difference in IC<sub>50</sub> values  
567 between laboratories. Bars represent mean IC<sub>50</sub> from each laboratory in µg/mL. Log IC<sub>50</sub> values used  
568 to allow multiple data sets on each graph. Error bars show the standard deviation.  
569

**Figure 5-2 NHK NRU IC<sub>50</sub> Values by Reference Substance and Laboratory**  
 (Substances are grouped from lowest mean IC<sub>50</sub> value (digoxin) to the highest mean IC<sub>50</sub> value (ethylene glycol)).

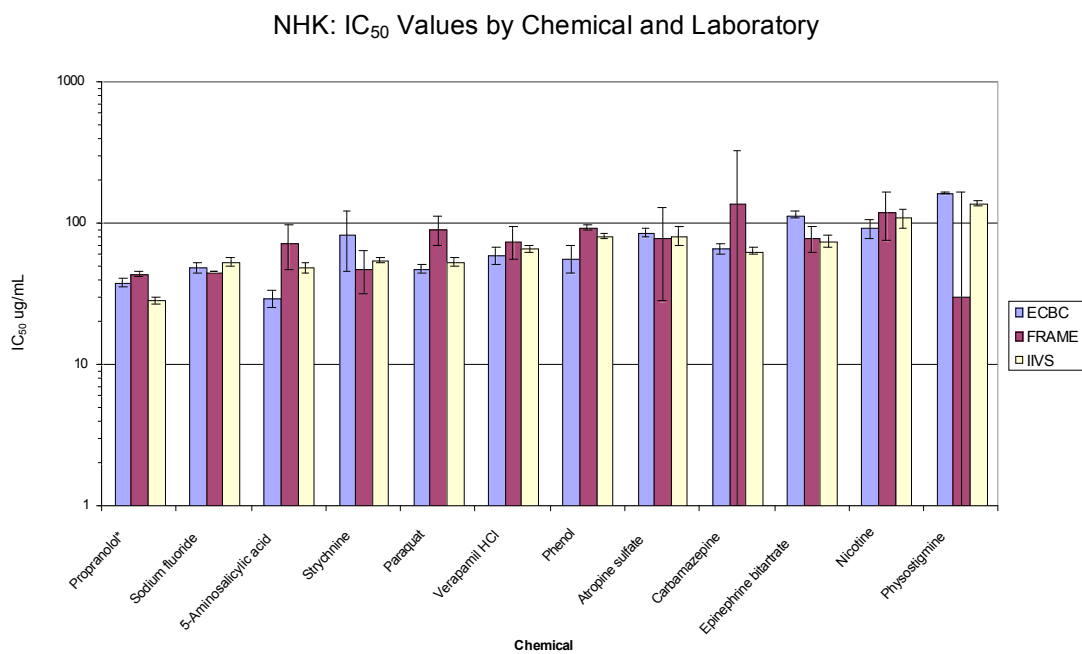
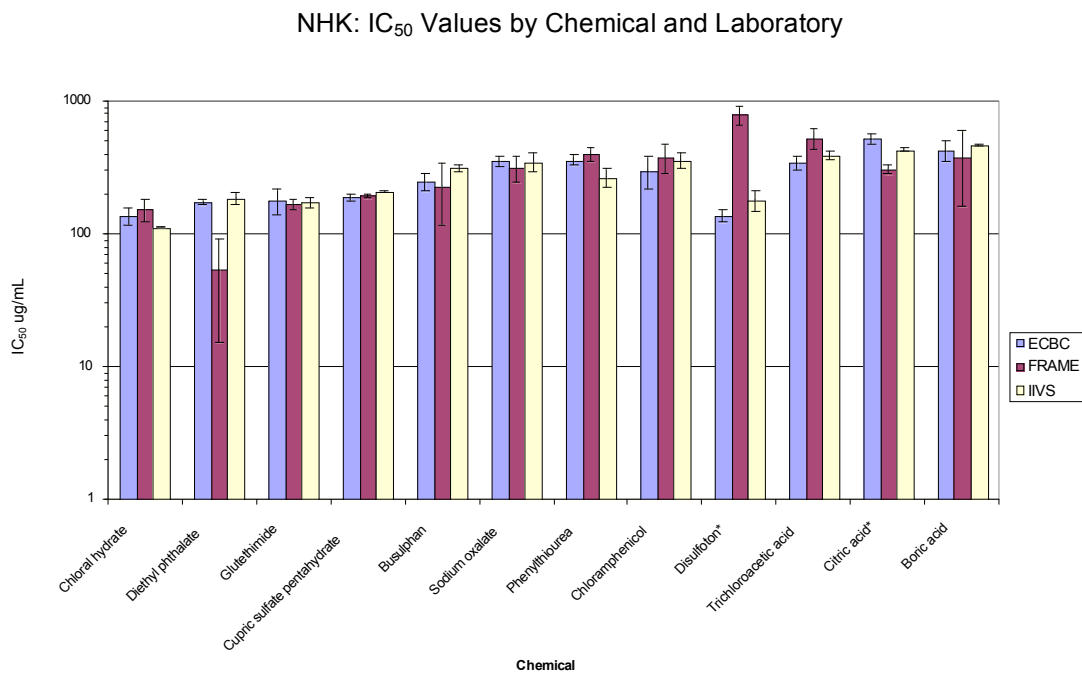
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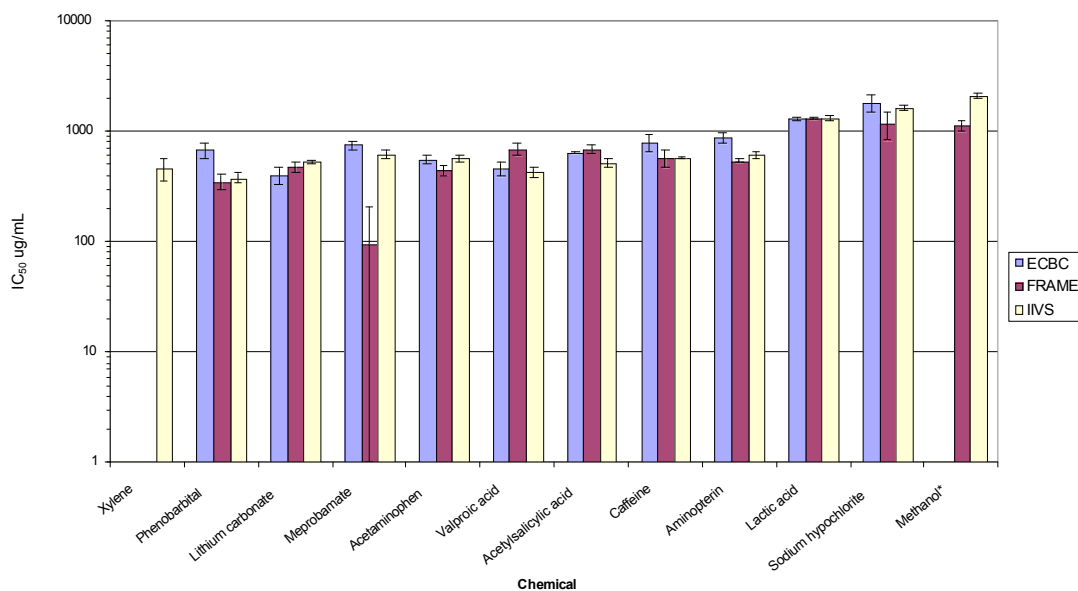
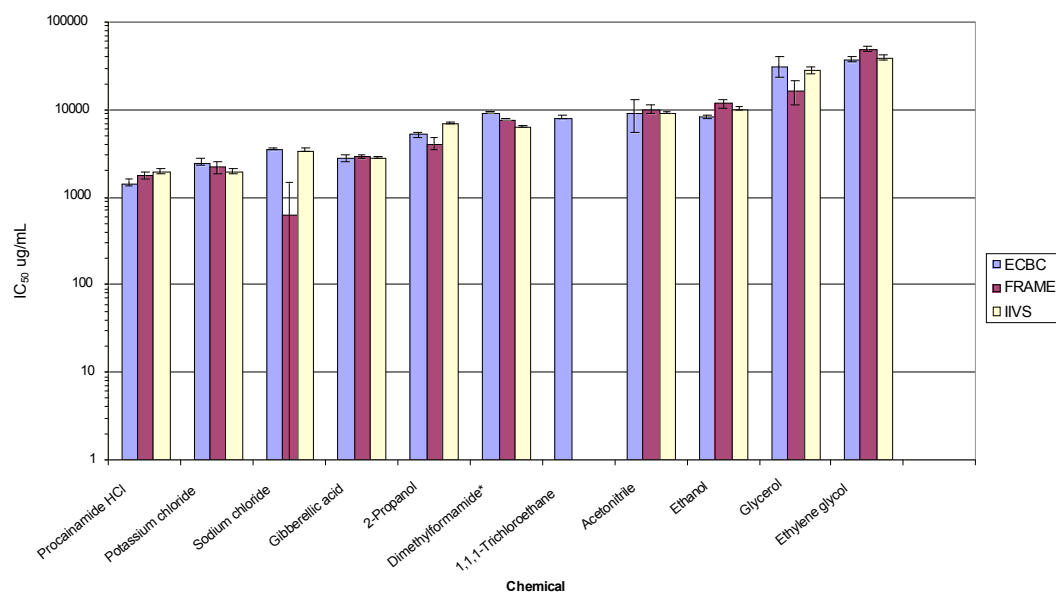
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NHK: IC<sub>50</sub> Values by Chemical and Laboratory585 f  
586NHK: IC<sub>50</sub> Values by Chemical and Laboratory

587  
 588 \*Represents a chemical where the standard ANOVA indicates a significant difference in IC<sub>50</sub> values  
 589 between laboratories. Bars represent mean IC<sub>50</sub> from each laboratory in µg/mL. Log IC<sub>50</sub> values used  
 590 to allow multiple data sets on each graph. Error bars show the standard deviation.

591

**Table 5-4 Comparison of 3T3 and NHK IC<sub>50</sub> Geometric Means**

Reference Substance	3T3 NRU Test Method Geometric Mean <sup>1</sup> IC <sub>50</sub> (µg/mL)	NHK NRU Test Method Geometric Mean <sup>1</sup> IC <sub>50</sub> (µg/mL)	Difference (Orders of Magnitude)
Carbon tetrachloride	NA	NA	NA
Methanol	NA	1529 <sup>b</sup>	NA
Aminopterin	0.006	669	5
Triphenyltin hydroxide	0.017	0.010	0
Colchicine	0.034	0.007	1
Cycloheximide	0.187	0.073	1
Triethylenemelamine	0.272	1.85	1
Cadmium II chloride	0.518	1.84	1
Sodium dichromate dihydrate	0.587	0.721	0
Sodium arsenite	0.759	0.477	0
Arsenic trioxide	1.96	5.26	0
Mercury II chloride	4.12	5.80	0
Hexachlorophene	4.19	0.029	2
Thallium I sulfate	5.74	0.152	1
Haloperidol	6.13	3.36	0
Endosulfan	6.35	2.13	0
Amitriptyline HCl	7.05	8.96	0
Diquat dibromide monohydrate	8.04	4.48	0
Propranolol	13.9	35.3	0
Dichlorvos	17.7	10.7	0
Paraquat	20.1	61.6	0
Fenprothrin	24.2	2.43	1
Physostigmine	25.8	88.5	0
Propylparaben	26.1	16.6	0
Sodium selenate	29.0	10.2	0
Potassium cyanide	34.6	29.0	1
Verapamil HCl	34.9	66.5	0
Parathion	37.4	30.3	0
Sodium oxalate	37.7	337	1
<b><i>Sodium lauryl sulfate (SLS)*</i></b>	<b>41.7</b>	<b>3.99</b>	<b>1</b>
Cupric sulfate pentahydrate	42.1	197	1
Acetaminophen	47.7	518	1
Dibutyl phthalate	49.7	28.7	0
Epinephrine bitartrate	59.0	87.4	0
Phenol	66.3	75.0	1
Atropine sulfate	76.0	81.8	0
Busulfan	77.7	260	1
Sodium I fluoride	78	49.8	0
Phenylthiourea	79.0	336	1
Carbamazepine	103	83.2	1
Diethyl phthalate	107	120	0
Lindane	108	18.7	1
Chloramphenicol	128	348	0
Disulfoton	133	270	0
Caffeine	153	638	0
Strychnine	158	62.5	1
Glutethimide	174	174	0



**Table 5-4 Comparison of 3T3 and NHK IC<sub>50</sub> Geometric Means**

Reference Substance	3T3 NRU Test Method Geometric Mean <sup>1</sup> IC <sub>50</sub> (µg/mL)	NHK NRU Test Method Geometric Mean <sup>1</sup> IC <sub>50</sub> (µg/mL)	Difference (Orders of Magnitude)
Chloral hydrate	183	133	0
Nicotine	361	107	0
Procainamide HCl	441	1741	1
Digoxin	466	0.001	5
Meprobamate	519	357	0
Lithium I carbonate	562 <sup>a</sup>	468	0
Phenobarbital	573	448	0
Acetylsalicylic acid	676	605	0
Xylene	721 <sup>a</sup>	466 <sup>a</sup>	0
Citric acid	796	400	0
Trichloroacetic acid	902	413	0
Valproic acid	916	512	0
Sodium hypochlorite	1103	1502	0
5-Aminosalicylic acid	1667	46.7	2
Boric acid	1850	421	1
Lactic acid	3044	1304	0
Potassium I chloride	3551	2237	0
2-Propanol	3618	5364	0
Sodium chloride	4730	1997	0
Dimethylformamide	5224	7760	0
Ethanol	6523	10018	1
Gibberellic acid	7810 <sup>b</sup>	2856	0
Acetonitrile	7951	9528	0
1,1,1-Trichloroethane	17248	8122 <sup>a</sup>	1
Ethylene glycol	24317	41852	0
Glycerol	24655	24730	0

Table sorted by 3T3 IC<sub>50</sub> values

<sup>1</sup>Laboratories combined; use of a geometric mean for the IC<sub>50</sub> values in **Table 5-4** is consistent with the approach used for the RC millimole regression to obtain a single IC<sub>50</sub> from multiple IC<sub>50</sub> values (Halle 1998).

<sup>a</sup>Data available from only one laboratory

<sup>b</sup>Data available from only two laboratories

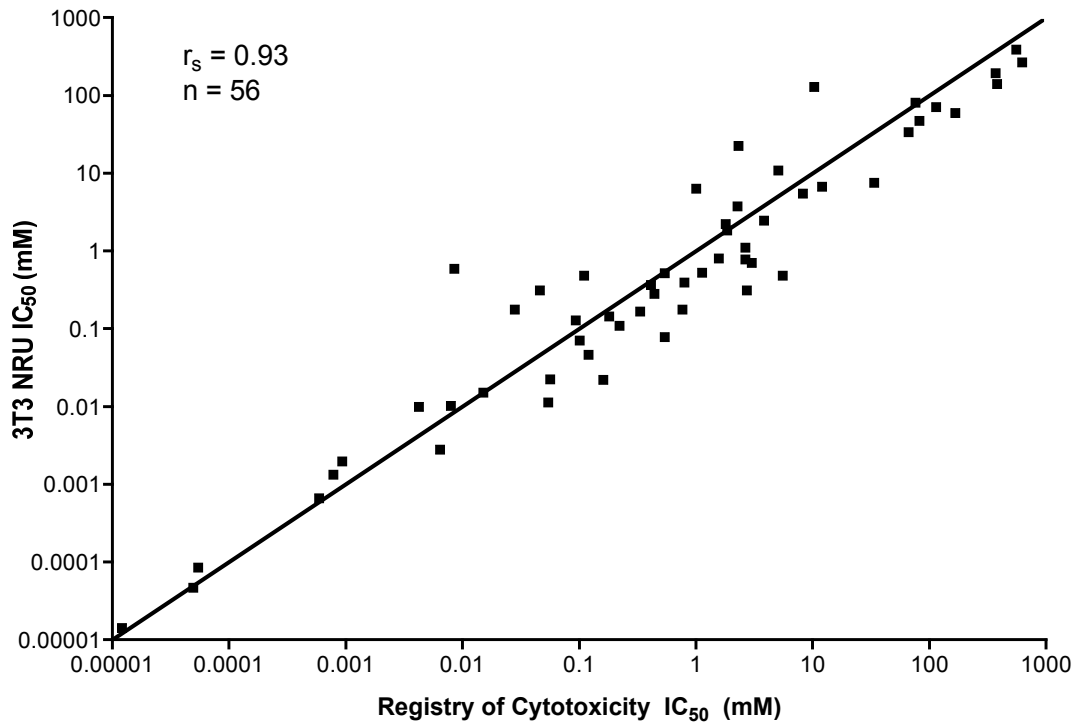
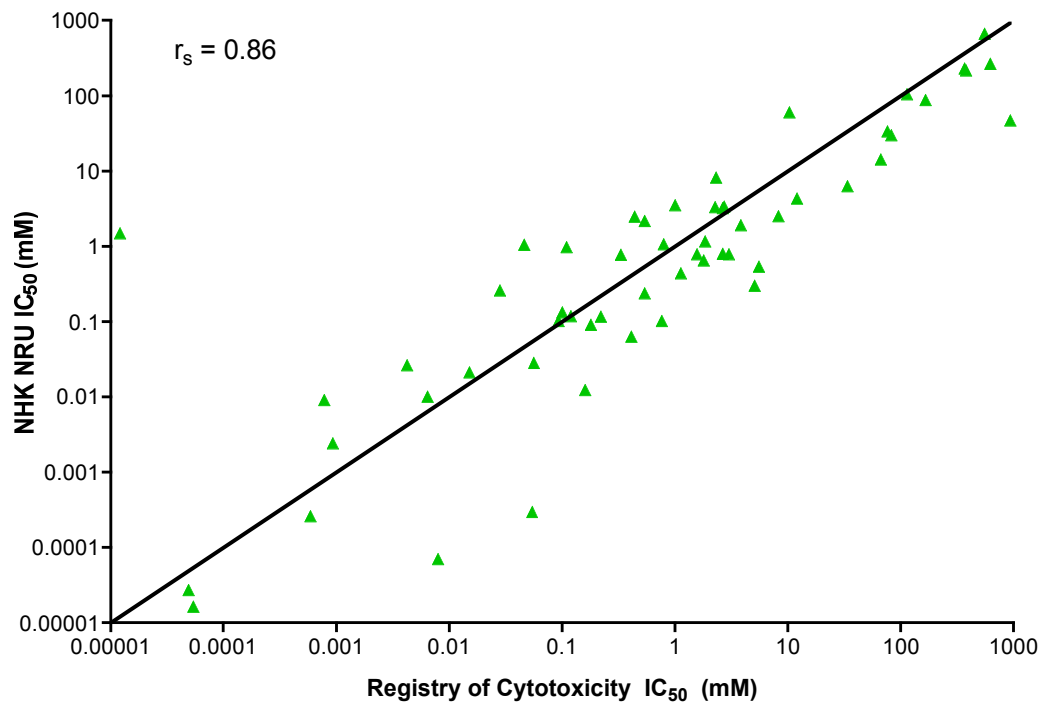
\*Positive control (SLS) values (met acceptance criteria) from all test phases: N = 293 (3T3); N = 281 (NHK)

NA = not available

Two chemicals, digoxin and aminopterin, have IC<sub>50</sub> values that differ by five orders of magnitude between the two cell types. Digoxin was much more toxic to the NHK cells and aminopterin was more toxic to the 3T3 cells. Hexachlorophene and 5-aminosalicylic acid IC<sub>50</sub> values were different by two orders of magnitude and both were more toxic to the NHK cells than the 3T3 cells. The positive control (SLS) values for the two cell types differed by an order of magnitude (41.7 µg/mL for 3T3; 3.99 µg/mL for NHK). Of the IC<sub>50</sub> reference substance values, 94.5% for both cell types were within at least 2 orders of magnitude of each other. **Table 5-5** illustrates the comparisons of the IC<sub>50</sub> values.

**Table 5-5      Difference in 3T3 and NHK NRU IC<sub>50</sub> Values as Orders of Magnitude**

Difference (Orders of Magnitude)	Percentage of Reference Substances
0	63.9% (46/72)
1	27.8% (20/72)
2	2.8% (2/72)
3	0
4	0
5	2.8% (2/72)
NA	2.8% (2/72)

**Figure 5-3 RC IC<sub>50</sub> Values vs 3T3 NRU IC<sub>50</sub> Values for the 58 Common Chemicals****Figure 5-4 RC IC<sub>50</sub> Values vs NHK NRU IC<sub>50</sub> Values for the 58 Common Chemicals**

## 5.5 Coded Reference Substances and GLP Guidelines

### 5.5.1 Coded Reference Substances

BioReliance acquired 73 high purity chemicals (72 reference substances and one positive control chemical, at 99% or greater purity when economically feasible) from reputable commercial sources (see **Appendix F**). BioReliance randomly coded each reference substance with a unique identification number when repackaging into multiple smaller units. These units were given an additional code unique for the respective cytotoxicity laboratories so that substances could be provided in a blinded fashion (see **Section 3.6** for distribution procedures). The reference substances were packaged and shipped such that their identities were concealed; however, all laboratories knew the identity of the positive control. The SMT revealed the reference substance codes for each phase after all laboratories had submitted their data and reports. Periodically, laboratories required additional aliquots of reference substance and BioReliance provided these aliquots from the original stock of reference substance in the same manner that the original aliquots were provided.

### 5.5.2 Lot-to-Lot Consistency of Reference Substances

One lot of each substance was purchased and each laboratory received aliquots from this same lot throughout the validation study. The substance suppliers provided certificates of analysis for each lot along with other chemical, physical, and safety information concerning the substance (e.g., MSDS documents).

### 5.5.3 Adherence to GLP Guidelines

BioReliance, ECBC, and IIVS, followed GLP procedures for all testing with the exception of tests designed to resolve technical challenges (e.g., formation of NR crystals, use of film plate sealers for volatile substances, slow growth of cells, etc.). These laboratories submitted data to their respective quality assurance unit (as per GLP requirements) and copies of the data were submitted to NICEATM. FAL followed most GLP guidelines, but their activities did not include independent quality assurance reviews of laboratory procedures or documentation. The Study Director for the FAL performed all data reviews and provided

copies to NICEATM. Hard copy printouts of all data as well as electronic versions are available at NICEATM.

## **5.6 Study Timeline and NICEATM/ECVAM Study Participatory Laboratories**

### **5.6.1 Statement of Work (SOW) and Protocols**

The SMT provided the laboratories with an SOW prior to initiation of testing (see **Appendix G**) and proposed dates for completion of various aspects of the study (e.g., transfer of data, provision of reports, etc.). The SOW for the cytotoxicity laboratories defined the following:

- project objectives
- management and key personnel
- required facilities, equipment, and supplies
- quality assurance requirements
- test phases and schedules
- products (e.g., reports) required
- report preparation

The SOW for BioReliance contained all of the above and included requirements for:

- reference substance acquisition, preparation, and distribution
- solubility testing

The SMT, in consultation with the laboratories, prepared Test Method Protocols for each phase of the study. Cytotoxicity testing for each phase (in each laboratory) was initiated when the SMT received a signed protocol specific for that phase from the Study Director. Solubility testing for Phases I and II was performed prior to cytotoxicity testing for those phases while solubility testing for the Phase III substances was performed throughout Phases II and III.

### 5.6.2 Study Timeline

The actual timeline achieved in the study is shown in **Table 5-6**. The SMT eased the original timeline presented in the SOWs due to various factors (e.g., protocol revisions, side studies, acquisition of medium, etc.).

**Table 5-6 Validation Study Timetable**

	BioReliance	ECBC	FAL	IIVS
Receipt of SOW	Jun 2002	Jun 2002	Jun 2002	Jun 2002
Procurement of Chemicals	Jul 2002 - Jan 2003	NA	NA	NA
Solubility Testing	Jul 2002 - Jan 2003	Sep 2004	Dec 2003	Jan 2004
Distribution of Reference Substances Phase Ia Phase Ib Phase II Phase III	Jul 2002 Sep 2002 Nov 2002 Feb - Mar 2003	NA	NA	NA
Initiation of Phase Ia	NA	Aug 2002	Aug 2002	Aug 2002
Completion of Phase Ia	NA	Nov 2002	Nov 2002	Oct 2002
Initiation of Phase Ib	NA	Dec 2002	Dec 2002	Dec 2002
Completion of Phase Ib	NA	May 2003	May 2003	May 2003
Initiation of Phase II	NA	Jun 2003	Jun 2003	Jun 2003
Completion of Phase II	NA	Nov 2003	Nov 2003	Nov 2003
Initiation of Phase III	NA	Dec 2003	Dec 2003	Dec 2003
Completion of Phase III	NA	Dec 2004	Dec 2004	Jan 2005

NA- not applicable; SOW = BioReliance distributed reference substances; ECBC, FAL, AND IIVS tested the reference substances

### 5.6.3 Participatory Laboratories

BioReliance Corporation

14920 Broschart Road

Rockville, Maryland 20850-3349

Study Director: Dr. Martin Wenk

U.S. Army Edgewood Chemical & Biological Center (ECBC)

Molecular Engineering Team

Aberdeen Proving Ground, MD 21010

Study Director: Dr. Cheng Cao

Institute for In Vitro Sciences (IIVS)

21 Firstfield Road Suite 220

Gaithersburg, MD 20878

Study Director: Mr. Hans Raabe

FRAME (Fund for the Replacement of Animals in Medical Experiments)

Alternatives Laboratory (FAL)

Queens Medical Centre

University of Nottingham

Nottingham NG7 2UH

United Kingdom

Study Director: Dr. Richard Clothier

## **5.7 Availability of Data**

All data were submitted and provided to the SMT via electronic files and paper copies. The laboratories also maintained copies of all raw data and the electronic files.

## **5.8 Solubility Test Results**

This study evaluated a solubility protocol (see **Section 2-7** and **Appendix B-3**) designed to identify the solvent that would provide the highest soluble concentration of a reference substance for *in vitro* testing. Each laboratory performed a solubility test on all reference substances. To avoid the use of different solvents by the laboratories when testing the same substance, the SMT assigned the solvents used for *in vitro* testing (see **Table 6-9**). The objectives of the solubility testing were to evaluate the utility and appropriateness of the

solubility protocol and to evaluate the concordance among laboratories in the solvent selected for each of the 72 reference substances.

#### 5.8.1 Solubility Data

BioReliance was the first laboratory to evaluate the solubility of the reference substances, first in media, then in DMSO, and then in ETOH at 400 and 200 mg/mL. Based on this experience, a solubility protocol for the *in vitro* laboratories was developed to test at lower test article concentrations and to test with the various solvents at concentrations that would be equivalent when applied to the cultures (see **Table 2-5**). The solubility flow chart (**Figure 2-7**) illustrates the tests for chemical solubility in medium, DMSO, and ETOH. **Table 5-7** provides the solubility results in mg/mL.



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**Table 5-7 Solubility Results (data presented in mg/mL)**

Reference Substance	BioReliance <sup>1</sup>				SMT <sup>2</sup> Selection	ECBC <sup>3</sup>				FAL <sup>3</sup>				IIVS <sup>3</sup>			
	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH		3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH
Phase I																	
Arsenic III trioxide	0.25	0.05	< 2	< 2	Medium	0.025 <sup>6</sup>	0.025 <sup>6</sup>	< 0.2	< 0.2	0.135 <sup>6</sup>	0.135 <sup>6</sup>	< 0.2	< 0.2	< 0.02 <sup>6</sup>	< 0.02 <sup>6</sup>	< 0.2	< 0.2
Ethylene glycol	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Propranolol HCl	< 2	10	200	20	DMSO	0.2	2	200	NT	20	20	200	NT	20	2	NT	NT
Phase II																	
Aminopterin	2	2	NT	NT	DMSO	2.0	< 2	200	NT	< 2	2	200	NT	0.2	0.2	200	NT
Cadmium II chloride	< 2	< 2	200	< 200	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 0.2	< 0.2	20	< 20
Chloramphenicol	2	2	400	< 200	DMSO	2.0	< 2	200	NT	< 2	< 2	200	NT	0.2	0.2	20	20
Colchicine	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Lithium I carbonate	0.25	10	< 2	NT	Medium	0.2	2.0	< 20	< 20	0.2	2	< 200	< 200	0.2	2	< 2	< 2
Potassium I chloride	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
2-Propanol	400	400	400	400	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Sodium I fluoride	20	20	< 200	< 200	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Sodium selenate	200	200	< 200	< 200	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Phase III																	
Acetaminophen	10	10	400	< 200	DMSO	2	2	NT	NT	2	2	NT	NT	< 2	< 2	200	NT
Acetonitrile	400	400	400	400	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Acetylsalicylic acid	10	10	400	200	DMSO	2	2	NT	NT	< 2	< 2	200	NT	2	2	NT	NT
5-Aminosalicylic acid	2	2	< 200	< 200	Medium	2	2	NT	NT	2	2	NT	NT	2	2	NT	NT
Amitriptyline HCl	200	200	NT	NT	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	0.2	0.2	200	NT

**Table 5-7 Solubility Results (data presented in mg/mL)**

Reference Substance	BioReliance <sup>1</sup>				SMT <sup>2</sup> Selection	ECBC <sup>3</sup>				FAL <sup>3</sup>				HVS <sup>3</sup>			
	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH		3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH
Atropine sulfate	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Boric acid	40	40	200	< 200	Medium	20	20	NT	NT	20	20	NT	NT	2	2	NT	NT
Busulfan	< 2	< 2	40	< 200	DMSO	< 2	< 2	200	NT	< 2	< 2	50 <sup>6</sup>	< 200	< 0.2	< 0.2	20	< 200
Caffeine	10	10	20	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Carbamazepine	< 2	< 2	40	< 200	DMSO	0.2	0.2	20	20	< 2	< 2	200	NT	< 0.2	< 0.2	2	< 20
Carbon tetrachloride	2	10	NT	NT	DMSO	20	20	NT	NT	< 0.2	< 0.2	2	NT	20	20	NT	NT
Chloral hydrate	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Citric acid	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Cupric sulfate pentahydrate	1	0.5	< 2	2	Medium	2	0.2	< 200	< 200	2	2	NT	NT	0.2	0.2	< 200	NT
Cycloheximide	20	20	400	< 200	Medium	20	20	NT	NT	20	20	NT	NT	2	2	NT	NT
Dibutyl phthalate	< 2	< 2	400	400	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Dichlorvos	10	10	NT	NT	DMSO	2	2	NT	NT	< 2	< 2	200	NT	2	2	NT	NT
Diethyl phthalate	< 2	< 2	400	400	DMSO	< 2	< 2	200	NT	0.2	< 0.2	200	NT	< 2	< 2	200	NT
Digoxin	0.05	0.05	200	< 200	DMSO	< 2	< 2	200	NT	< 0.2	< 0.2	200	NT	< 2	< 2	200	NT
Dimethylformamide	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Diquat dibromide monohydrate	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Disulfoton	< 2	< 2	500	NT	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Endosulfan	< 0.05	< 0.05	40	NT	DMSO	< 0.2	< 0.2	20	< 200	< 0.2	< 0.2	2	< 200	< 0.2	< 0.2	20	< 200
Epinephrine bitartrate	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	2	2	NT	NT
Ethanol	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Fenpropathrin	< 20	< 20	500	NT	DMSO	< 2	< 2	200	NT	< 0.2	< 0.2	200	NT	< 2	< 2	200	NT

**Table 5-7 Solubility Results (data presented in mg/mL)**

Reference Substance	BioReliance <sup>1</sup>				SMT <sup>2</sup> Selection	ECBC <sup>3</sup>				FAL <sup>3</sup>				HVS <sup>3</sup>			
	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH		3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH
Gibberellic acid	10	10	NT	NT	Medium	2	2	NT	NT	2	2	NT	NT	2	2	NT	NT
Glutethimide	< 2	< 2	500	NT	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Glycerol	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Haloperidol	< 20	< 20	40	NT	DMSO	< 0.2	< 0.2	20	< 20	< 0.2	< 0.2	20	< 20	< 2	< 2	20	< 20
Hexachlorophene	0.05	< 0.05	400	400	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Lactic acid	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Lindane	< 0.05	< 0.05	400	< 200	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 0.2	< 0.2	20	< 200
Meprobamate	1	1	200	NT	DMSO	2	2	200	NT	2	2	200	NT	< 0.2	< 0.2	200	NT
Mercury II chloride	0.125	0.125	400	< 200	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 0.2	< 0.2	200	NT
Methanol	40	40	400	400	DMSO	20	20	NT	NT	20	20	NT	NT	< 2	< 2	200	NT
Nicotine	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Paraquat	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Parathion	0.05	< 0.05	400	400	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Phenobarbital	2	2	200	< 200	DMSO	2	2	NT	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Phenol	40	40	400	400	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Phenylthiourea	2	2	400	< 200	DMSO	2	< 2	200	NT	20	20	NT	NT	< 2	< 2	200	NT
Physostigmine	2	2	400	200	DMSO	2	2	NT	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Potassium cyanide	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Procainamide HCl	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Propylparaben	0.25	0.25	400	400	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 2	< 2	200	NT
Sodium arsenite	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT

**Table 5-7 Solubility Results (data presented in mg/mL)**

Reference Substance	BioReliance <sup>1</sup>				SMT <sup>2</sup> Selection	ECBC <sup>3</sup>				FAL <sup>3</sup>				HVS <sup>3</sup>			
	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH		3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH	3T3 <sup>4</sup> Medium	NHK <sup>5</sup> Medium	DMSO	ETOH
Sodium chloride	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Sodium dichromate dihydrate	400	400	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Sodium hypochlorite	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Sodium oxalate	< 0.05	20	0.125	< 0.05	Medium	< 0.2	20	0.2	< 2	20	20	NT	NT	< 0.2	< 0.2	< 0.2	< 0.2
Strychnine	< 2	< 2	2	2	Medium	0.2	< 0.2	2	2	0.2	0.2	< 200	< 200	< 0.2	< 0.2	< 0.2	< 0.2
Thallium I sulfate	1	0.5	< 2	< 2	Medium	0.2	0.2	< 200	< 200	< 0.2	< 0.2	< 0.2	< 0.2	0.2	0.2	< 20	< 200
Trichloroacetic acid	200	200	NT	NT	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
1,1,1-Trichloroethane	10	10	400	400	Medium	20	20	NT	NT	20	20	NT	NT	20	20	NT	NT
Triethylenemelamine	< 2	< 2	2	< 20	DMSO	0.2	0.2	< 200	< 200	< 0.2	< 0.2	2	< 2	< 0.2	< 0.2	< 0.2	< 0.2
Triphenyltin hydroxide	< 0.05	< 0.05	10	< 20	DMSO	< 0.2	< 0.2	2	< 20	< 0.2	< 0.2	2	< 200	< 2	< 2	2	< 20
Valproic acid	10	2	NT	NT	DMSO	2	2	NT	NT	< 2	< 2	200	NT	2	< 2	200	NT
Verapamil HCl	< 0.05	0.25	200	NT	DMSO	< 2	< 2	200	NT	< 2	< 2	200	NT	< 0.2	< 0.2	20	NT
Xylene	1	1	500	NT	DMSO	< 2	< 2	200	NT	2	< 2	200	NT	< 2	< 2	200	NT

Table sorted by study phase and alphabetical by reference chemical

<sup>1</sup>Used a different solubility protocol from the *in vitro* cytotoxicity laboratories.

<sup>2</sup>Solvents selected by the SMT for cytotoxicity testing. BioReliance results were used to determine solvents for Phases I and II. Results from all laboratories were used to determine solvents for Phase III. Media were treated as one result. If insoluble in one medium and soluble in DMSO, DMSO was selected.

<sup>3</sup>Used protocol in **Figure 2-7**.

<sup>4</sup>Dulbecco's Modification of Eagle's Medium.

<sup>5</sup>Keratinocyte Growth Medium (KGM® from CAMBREX Clonetics®).

<sup>6</sup>Protocol deviation.

*In vitro* laboratories agreed on solvent.  *In vitro* laboratories did not agree on solvent. ***bold*** Protocol did not provide enough information to select a solvent.

NT– not tested.

### 5.8.2 Solubility Effects on the *In Vitro* NRU Cytotoxicity Test Method Data

The laboratories reported solubility results for the stock solutions for each 3T3 and NHK NRU test. Prior to the additions of the NR dye medium for the NRU test method, the laboratories visually observed the test cultures and documented noticeable precipitate found in the test plates. **Table 5-8** illustrates the existence of solubility issues (in both 3T3 and NHK NRU experiments) as evidenced by the observation of precipitates with some reference substances. Volatility difficulties, indicated by the use of film plate sealers during substance incubation, are also indicated in this table. **Section 3.5** provides additional information on the solubility of specific reference substances.

**Table 5-8 Reference Substances with Precipitate (PPT) and Volatility Issues<sup>1</sup>**

Reference Substances	3T3 NRU Test Method				NHK NRU Test Method			
	PPT 2X Stock Dilutions	PPT 1X Plate Dilutions	PPT Stock and Plate Dilutions	Volatility	PPT 2X Stock Dilutions	PPT 1X Plate Dilutions	PPT Stock and Plate Dilutions	Volatility
Acetonitrile				X				X
Aminopterin		X			X			
5-Aminosalicylic acid	X							
Arsenic III trioxide	X				X			
Cadmium II chloride		X					X	
Carbamazepine			X					
Carbon tetrachloride			X		X			
Citric acid						X		
Cupric sulfate pentahydrate						X		
Dibutyl phthalate		X					X	
Dichlorvos				X				X
Diethyl phthalate	X						X	
Digoxin			X					
Dimethylformamide						X		
Disulfoton			X				X	
Endosulfan	X			X				X
Ethanol				X				X
Fenpropathrin			X				X	
Gibberellic acid	X				X			
Glutethimide					X			
Lindane			X	X			X	
Lithium I carbonate	X				X			
Nicotine				X				X
Parathion	X						X	
Phenol				X				X
Potassium I chloride		X						
Potassium cyanide		X		X				X
2-Propanol				X				X
Sodium arsenite		X						X
Sodium chloride						X		
Sodium I fluoride		X				X		
Sodium hypochlorite				X				
Sodium oxalate			X			X		
Strychnine	X				X			
Trichloroacetic acid						X		
1,1,1-Trichloroethane	X						X	
Valproic acid	X							
Verapamil HCl					X			
Xylene	X				X			

Table sorted alphabetical by reference substance

<sup>1</sup>Results are based on at least one laboratory having precipitate and volatility issues with a substance. Volatility was denoted by the use of plate sealers during testing. 2X stock dilutions are prepared for each of 8 test substance concentrations. 1X plate dilutions are the result of diluting the 2X stock solutions with medium in the 96-well plate.

## 5.9 Summary

- Modifications and revisions made to the protocols during Phases I and II contributed to the optimization of the final protocols used in Phase III of the study. The changes did not have a negative impact on the 3T3 and NHK NRU test method data. Generally, changes enhanced the performance of the *in vitro* NRU cytotoxicity test methods and allowed more tests to meet acceptance criteria.
- FAL improved testing quality by modifying the methods used to propagate the NHK cells prior to Phase II testing. Positive control IC<sub>50</sub> data in Phases II and III from FAL more closely resembled the data from the other laboratories after test methods were optimized.
- Summary test data are presented in tabular and graphical formats. Comparisons of 3T3 IC<sub>50</sub> values to NHK IC<sub>50</sub> values show that most values (92%) are within one order of magnitude of each other. Digoxin and aminopterin data had a difference of five orders of magnitude when IC<sub>50</sub> values are compared between the cell types.
- The BioReliance, ECBC, and IIVS laboratories performed the 3T3 and NHK NRU experiments in compliance with GLP guidelines and submitted quality data. The reference substance quality was maintained throughout the study and lot-to-lot consistency was not a factor in testing.
- Each laboratory followed the same solubility protocol when making reference substance dilutions yet differences in results were present. Judgment of solubility is subjective (as per this protocol).

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## 6.0 ACCURACY OF THE 3T3 AND NHK NRU TEST METHODS

This section discusses the accuracy of the 3T3 and NHK NRU test methods for predicting acute oral systemic toxicity. Accuracy, the agreement between a test method result and an accepted reference value, is a critical component of the ICCVAM evaluation of the validation status of a test method (ICCVAM 2003). Although the 3T3 and NHK NRU test methods are not suitable as replacements for acute systemic toxicity assays, the ability of these assays to correctly predict LD<sub>50</sub> values are used to evaluate their accuracy. The rationale for evaluating the accuracy of LD<sub>50</sub> predictions is that the animal savings produced by using these *in vitro* test methods to predict starting doses for acute systemic toxicity assays will be greatest when the starting dose is as close as possible to the “true” LD<sub>50</sub> value (see **Section 10** for the evaluation of animal savings).

The ability of the 3T3 and NHK NRU test methods to correctly predict rodent acute oral systemic toxicity is based on the validity of the *in vitro* – *in vivo* regression model. It is the *in vivo* – *in vitro* regression that establishes the relationship between the 3T3 and NHK NRU IC<sub>50</sub> values and the predicted LD<sub>50</sub> values that are to be used to set the starting doses for the acute oral systemic toxicity assays in this study.

Upon review of these regressions, it became apparent that the regression model could be improved. This section discusses the evolution of these improvements. Initially, since the regressions generated by the three laboratories were not statistically different, the data were combined (using a geometric mean IC<sub>50</sub> of the three individual laboratory geometric mean IC<sub>50</sub> values) into a single regression for each test method (3T3 and NHK). These regressions, in millimole units, were then compared to the RC millimole regression that was created using rat and mouse oral LD<sub>50</sub> values from RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for 347 substances with known molecular weights (Halle 1998). Because the 3T3 and NHK NRU test method regressions were not statistically different from the RC regression, the RC regression was chosen to predict the LD<sub>50</sub> values from the NRU generated IC<sub>50</sub> values because it is based on a much larger database.

The next steps taken were to improve upon the RC millimole regression's ability to accurately predict LD<sub>50</sub> values from IC<sub>50</sub> values, and to make the approach relevant to the testing of mixtures and substances without a known molecular weight in rats, the preferred species for acute oral toxicity testing (EPA 2002b; OECD 2001a; OECD 2001d). To achieve this goal, three new regressions are presented.

The first regression -- a RC rat-only millimole regression -- utilizes only the 282 substances in the RC dataset of 347 substances that had a reported rat LD<sub>50</sub> value. The next step was to transform this RC rat-only millimole regression to one based on a weight basis (mg/kg body weight for LD<sub>50</sub> and µg/mL for IC<sub>50</sub>) in order to make the regression more generally applicable to the testing of mixtures and substances without a known molecular weight.

Upon review of this rat-only weight regression, it became apparent that many of the substances with underpredicted toxicity had mechanisms of toxicity that could not be expected to be detected in the 3T3 and NHK cell lines. These mechanisms included neurotoxic and cardiotoxic mechanisms, interference with energy utilization, and agents that alkylate macromolecules. Therefore, the third improved regression presented is based on an RC dataset of 232 substances that have rat LD<sub>50</sub> data and that excludes the 50 substances which are reported to induce toxicity via one of the above mentioned mechanisms of action.

The ability of the 3T3 and NHK NRU IC<sub>50</sub> data to correctly predict rat acute oral LD<sub>50</sub> values, based on using the RC millimole regression and two of the modified regressions (RC rat-only weight regression and RC rat-only weight regression excluding substances with specific mechanisms of toxicity), was evaluated by determining the extent to which the appropriate GHS acute oral toxicity category was identified for each reference substance. This approach permits an assessment of accuracy specific to each GHS hazard classification category. The results of these analyses are presented in **Section 6.3**. The discordant reference substances from the predictions of GHS acute oral toxicity category are presented in **Appendix L-2**.

The remainder of **Section 6** discusses physical, chemical, and biological characteristics of substances that may have an impact on the accuracy of the 3T3 and NHK NRU test methods.

## **6.1 Accuracy of the 3T3 and NHK NRU Test Methods for Predicting Acute Oral Systemic Toxicity**

Rodent LD<sub>50</sub> values are used as the reference values for assessing the ability of the 3T3 and NHK NRU test methods to accurately predict acute oral systemic toxicity. The accuracy of the two *in vitro* cytotoxicity test methods is assessed in two ways: (1) by the goodness of fit of the *in vitro* NRU IC<sub>50</sub> data to the rodent LD<sub>50</sub> data in linear regression analyses, and (2) by the concordance (i.e., extent of agreement) between the GHS acute oral toxicity categories (UN 2005) assigned based on rodent LD<sub>50</sub> data and those predicted using *in vitro* NRU IC<sub>50</sub> data.

### **6.1.1 Linear Regression Analyses for the Prediction of *In Vivo* Rodent LD<sub>50</sub> Values from *In Vitro* NRU IC<sub>50</sub> Values**

As described in **Section 5.3.4**, linear regressions for each test method were calculated using log IC<sub>50</sub> values (mM) versus the corresponding reference log LD<sub>50</sub> values (mmol/kg) identified in **Table 4-2**. The slopes for all regressions were statistically significantly different from zero ( $p < 0.0001$ ), which indicates a significant relationship between *in vitro* IC<sub>50</sub> values and the corresponding rodent LD<sub>50</sub> values.

Comparison of the individual laboratory regressions to one another with the goodness of fit F-test described in **Section 5.3.3** (under “Generation of Other Linear Regressions”) indicated that the laboratory-specific regressions for either *in vitro* NRU cytotoxicity test method were not significantly different from one another (see **Section 7.0** for a more detailed discussion of the results of this analysis). Because the individual laboratory regressions were not significantly different, data were combined into a single regression for each test method using the geometric mean of the mean IC<sub>50</sub> values determined by each laboratory for each substance (see the “Combined-laboratory” regressions in **Table 6-1** and **Figure 6-1**). The

combined-laboratory 3T3 regression yielded a better fit to the reference LD<sub>50</sub> data (adjusted R<sup>2</sup> = 0.524) than the combined-laboratory NHK regression (adjusted R<sup>2</sup> = 0.455).

**Table 6-1 Linear Regression Analyses of the 3T3 and NHK NRU and *In Vivo* Rodent LD<sub>50</sub> Test Results<sup>a</sup>**

Laboratory	N <sup>b</sup>	Slope	Intercept	Adjusted R <sup>2</sup>
<b>3T3 NRU Test Method</b>				
ECBC <sup>c</sup>	69	0.580	0.467	0.531
FAL <sup>c</sup>	67	0.543	0.287	0.432
IIVS <sup>c</sup>	69	0.585	0.467	0.534
Combined-laboratory <sup>d</sup>	70	0.589	0.425	0.524
<b>NHK NRU Test Method</b>				
ECBC <sup>c</sup>	69	0.507	0.405	0.446
FAL <sup>c</sup>	69	0.466	0.427	0.411
IIVS <sup>c</sup>	70	0.513	0.439	0.454
Combined-laboratory <sup>d</sup>	71	0.510	0.452	0.455

<sup>a</sup>Log IC<sub>50</sub> in mM; log LD<sub>50</sub> in mmol/kg.

<sup>b</sup>Number of substances used to calculate regression.

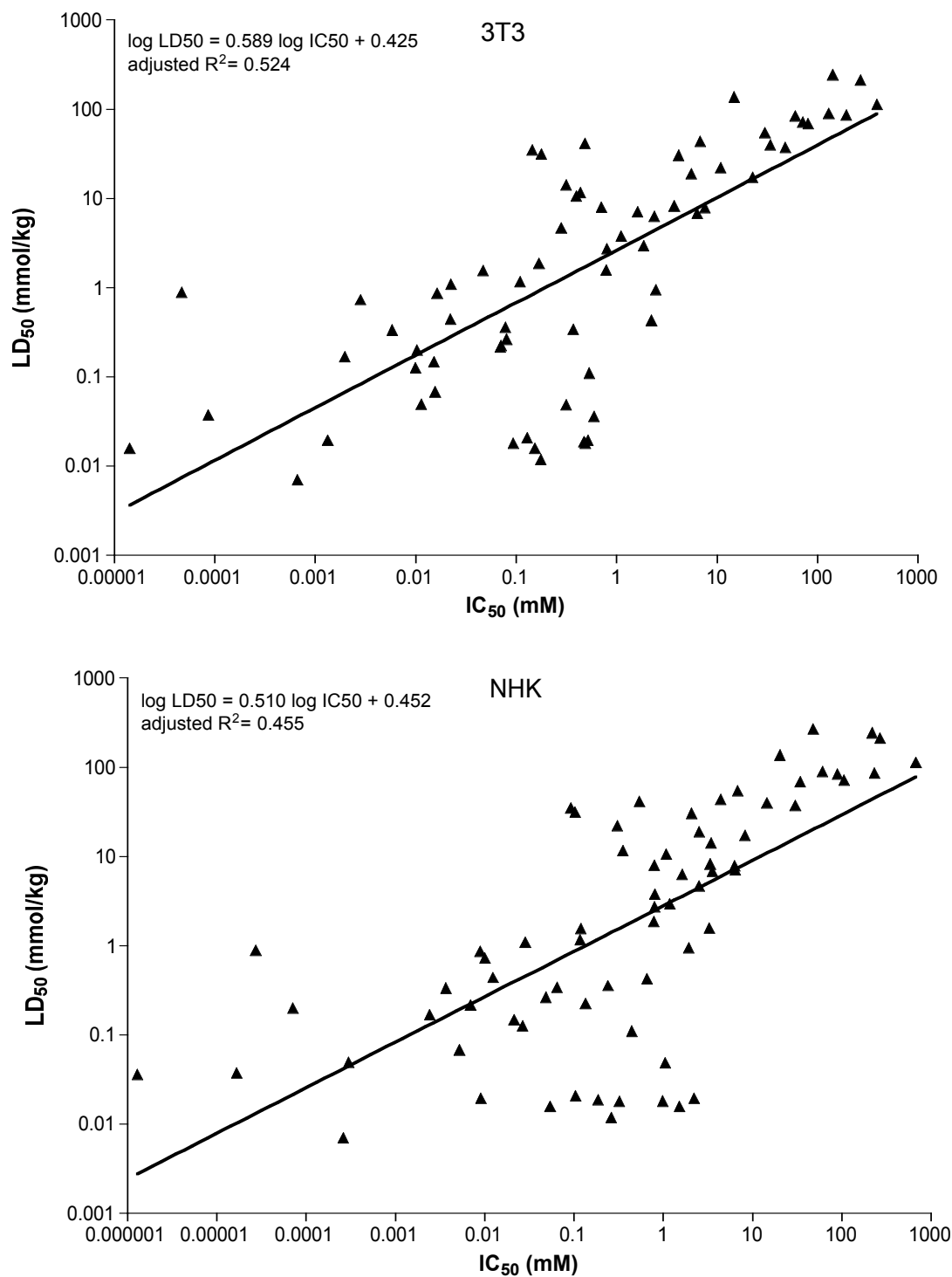
<sup>c</sup>Regression based on a single point per substance (i.e., the geometric mean of the within laboratory replicate IC<sub>50</sub> values and the reference rodent oral LD<sub>50</sub> from **Table 4-2**).

<sup>d</sup>Regression based on a single point per substance (i.e., the geometric mean of the geometric mean IC<sub>50</sub> values obtained for each laboratory and the reference rodent oral LD<sub>50</sub> from **Table 4-2**). Data for 70 substances in the 3T3 assay and 71 substances in the NHK assay. No laboratory achieved sufficient toxicity for calculation of an IC<sub>50</sub> for carbon tetrachloride or methanol in the 3T3 NRU test method or for carbon tetrachloride in the NHK NRU test method.

Abbreviations: ECBC – US Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for *In Vitro* Sciences

#### 6.1.2 Comparison of the Combined-Laboratory 3T3 and NHK NRU Regressions to the RC Millimole Regression

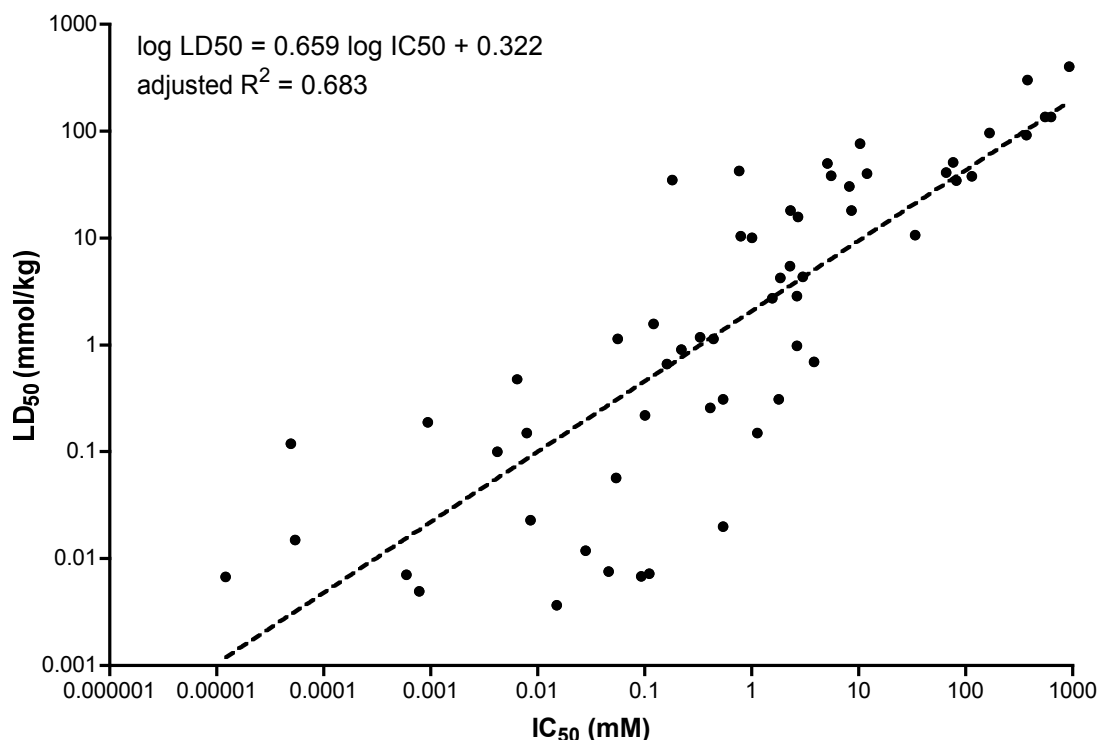
The NICEATM/ECVAM validation study tested 58 RC substances (see **Figure 3-1**). A comparison of the regression developed for the 3T3 and NHK NRU test results to the RC millimole regression was made to test the assumption of the *Guidance Document* that the RC millimole regression can be obtained with a basal cytotoxicity test method using a single cell type and cytotoxicity endpoint (ICCVAM 2001b). The regression for the 58 substances calculated using the RC IC<sub>50</sub> and LD<sub>50</sub> data points is shown in **Figure 6-2**. A graphical comparison of the RC millimole regression for the 58 substances to the 3T3 and NHK combined-laboratory regressions is shown in **Figure 6-3**. A statistical comparison of slope

172 **Figure 6-1 Combined-Laboratory 3T3 and NHK Regressions**

173  
 174 Solid lines show the combined-laboratory regressions for each test method (see **Table 6-1**).  
 175

and intercept (simultaneously) using an F test showed that neither the 3T3 regression ( $p = 0.929$ ) nor the NHK regression ( $p = 0.144$ ) was different from the 58 RC substance regression.

**Figure 6-2 Regression for the 58 RC Substances Using RC Data**

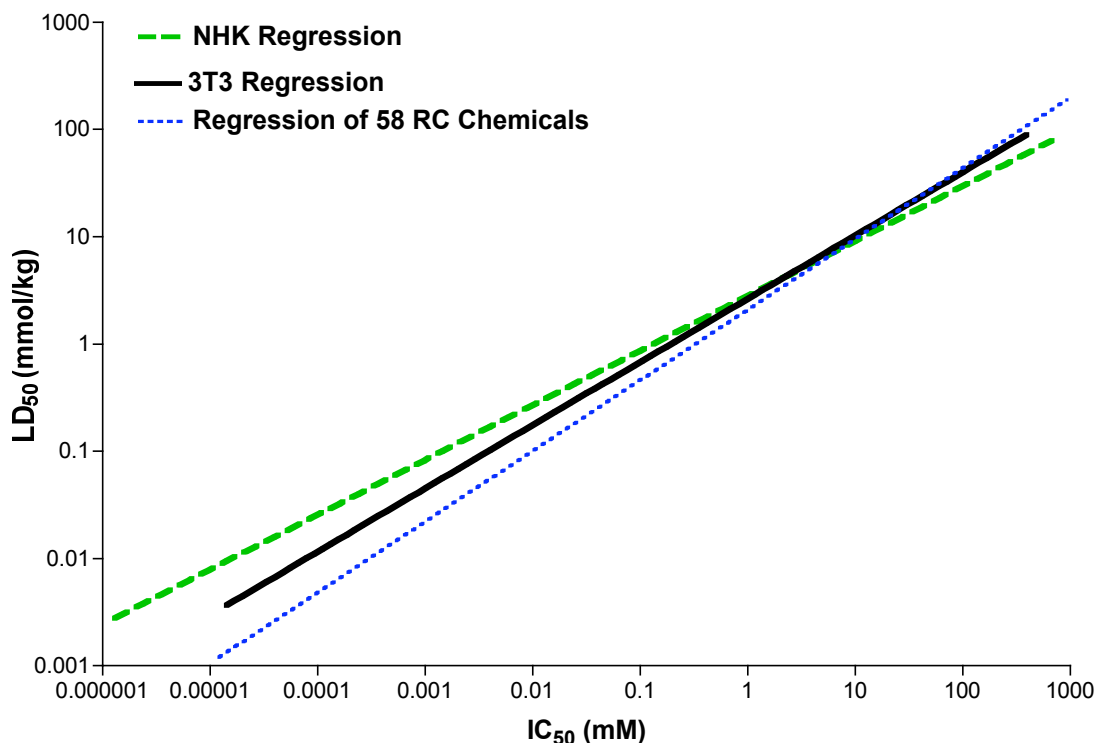


## 6.2 Improving the Prediction of *In Vivo* Rodent LD<sub>50</sub> Values from *In Vitro* NRU IC<sub>50</sub> Data

Since the RC and the 3T3 and NHK NRU IC<sub>50</sub> – rodent acute oral LD<sub>50</sub> regressions were not significantly different, the next step was an attempt to improve upon the RC millimole regression for the prediction of LD<sub>50</sub> from IC<sub>50</sub>. The RC data were used to develop three new regressions. For reference, the original RC millimole regression,  $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \times \log \text{IC}_{50x} (\text{mM}) + 0.625$  (Halle 1998), is shown in **Table 6-2** and **Figure 6-4**.



**Figure 6-3 Regression for the 58 RC Substances with the 3T3 and NHK NRU Regressions**



Regression for the 58 RC substances using RC data is  $\log LD_{50} = 0.659 \log IC_{50} + 0.323$  (adjusted  $R^2 = 0.683$ ). The combined-laboratory 3T3 NRU regression, which uses data for 70 substances, is  $\log LD_{50} = 0.589 \log IC_{50} + 0.425$  (adjusted  $R^2 = 0.524$ ) (from **Table 6-1**). The combined-laboratory NHK NRU regression, which uses data for 71 substances, is  $\log LD_{50} = 0.510 \log IC_{50} + 0.452$  (adjusted  $R^2 = 0.455$ ) (from **Table 6-1**). No laboratory achieved sufficient toxicity for calculation of an  $IC_{50}$  for carbon tetrachloride or methanol in the 3T3 NRU test method or for carbon tetrachloride in the NHK NRU test method.

#### 6.2.1 The RC Rat-Only Regression in Millimolar Units

The first regression used the RC data only for the 282 substances with rat  $LD_{50}$  data (i.e., the regression excluded the substances with mouse  $LD_{50}$  data) using the original units of mM for  $IC_{50}$  and mmol/kg for  $LD_{50}$  (see **Table 6-2** and **Figure 6-4**). Rat data only were used because:

- rats and mice may not have the same sensitivity to individual substances, regardless of the high correlation of a subset of 173 RC substances with both rat and mouse  $LD_{50}$  data ( $r_s = 0.88$ ;  $p < 0.0001$ ) (see **Section 4.1.4**)

- the majority of LD<sub>50</sub> data used in the RC millimole regression were from studies using rats (282 rat data points and 65 mouse data points) (Halle 1998)
- the great majority of acute oral systemic toxicity testing is performed with rats

**Table 6-2 Linear Regression Analyses to Improve the Prediction of Rodent LD<sub>50</sub> from *In Vitro* NRU IC<sub>50</sub> Using the RC Regression<sup>a</sup>**

Data Used	Slope	Intercept	Adjusted R <sup>2</sup>
347 RC substances with rat and mouse LD <sub>50</sub> data – millimole units <sup>c</sup>	0.435	0.625	0.450 <sup>d</sup>
282 RC substances with rat LD <sub>50</sub> data – millimole units <sup>c</sup>	0.439	0.621	0.451
282 RC substances with rat LD <sub>50</sub> data – weight units <sup>c</sup>	0.372	2.024	0.322
232 RC substances with rat LD <sub>50</sub> data (excluded 50 substances with specific mechanisms of action <sup>f</sup> ) – weight units <sup>c</sup>	0.357	2.194	0.353

<sup>a</sup>Slopes of all regressions were significantly different ( $p < 0.05$ ) from zero at  $p < 0.0001$ .

<sup>b</sup>Simultaneous comparison of slopes and intercepts using an F test. Significance denoted by  $p < 0.05$ .

<sup>c</sup>IC<sub>50</sub> in mM; LD<sub>50</sub> in mmol/kg.

<sup>d</sup>Calculated from RC data (i.e., not reported by Halle [1998]).

<sup>e</sup>IC<sub>50</sub> in µg/mL; LD<sub>50</sub> in mg/kg.

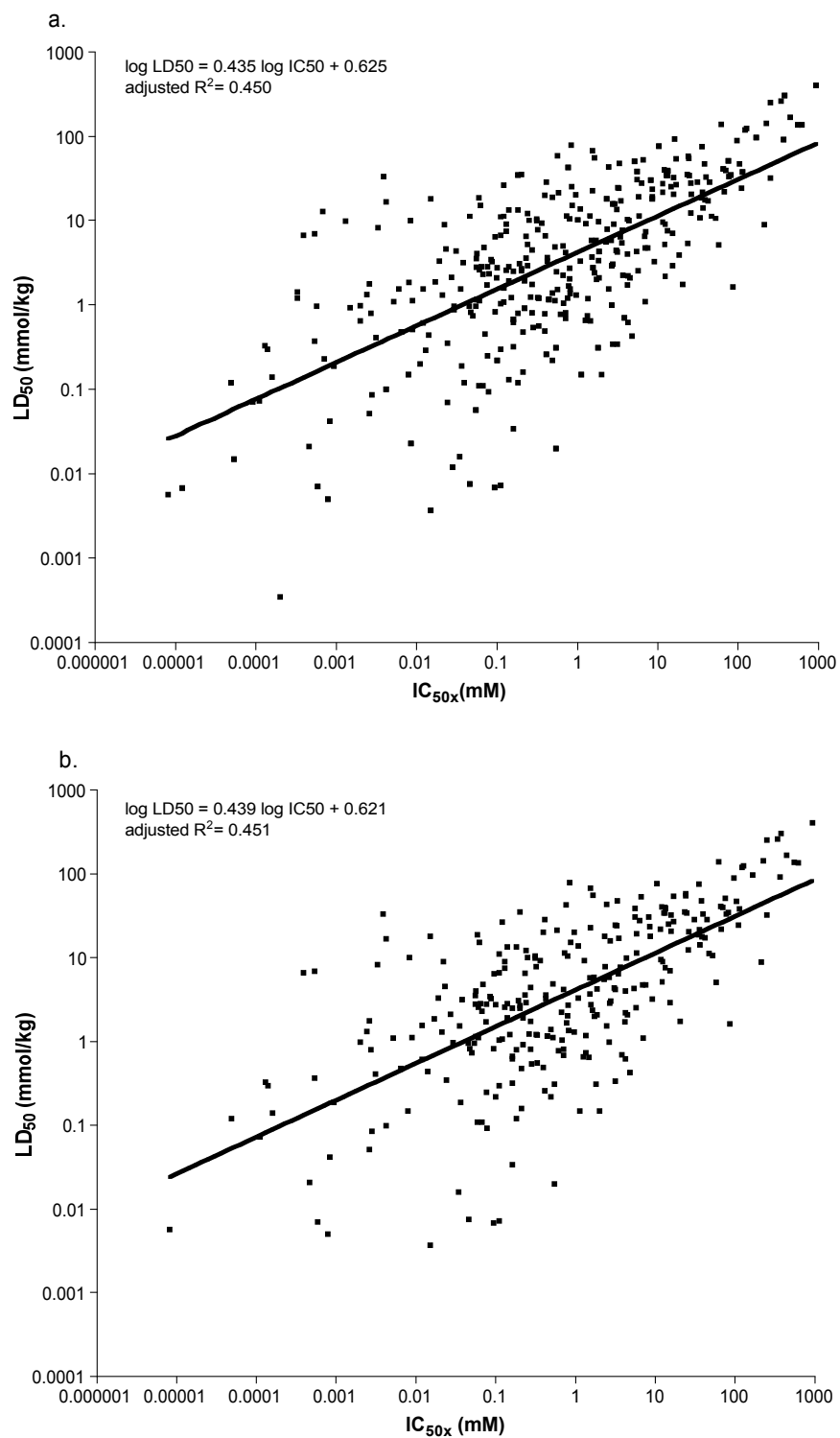
<sup>f</sup>See the text for the applicable mechanisms and **Appendix K-3** for the identified substances.

**Table 6-2** shows that the regression using rat LD<sub>50</sub> data only was almost identical to the original RC millimole regression which used both rat and mouse LD<sub>50</sub> data. The slope changed from 0.435 for the RC millimole regression to 0.439 and the intercept changed from 0.625 to 0.621.

### 6.2.2 The RC Rat-Only Regression in Weight Units

The second regression used the same RC data for the 282 substances with rat LD<sub>50</sub> data, but was calculated with weight units rather than millimolar units (see **Table 6-2** and **Figure 6-5**). Weight units (i.e., mg/kg for the LD<sub>50</sub> and µg/mL for the IC<sub>50</sub>) were selected for the units of measurement because

- millimole units are not applicable to mixtures and unknown substances
- they are most practical [i.e., in all regulatory systems, hazard classification is based on LD<sub>50</sub> values expressed in mg/kg (see **Table 1-2**)]

235 **Figure 6-4 RC Regression (a) and RC Rat Regression (b) Using Millimole Units**

236

### 6.2.3 The RC Rat-Only Regression in Weight Units Excluding Substances with Specific Mechanisms of Toxicity

The third regression was a further refinement on the weight-unit regression developed from the 282 RC substances with rat LD<sub>50</sub> data. It excluded the RC substances for which the mechanisms of toxic action were not expected to be active in the 3T3 and NHK cell cultures. This reduced the number of data points from 282 to 232 RC substances for the calculation of the regression (see **Table 6-2** and **Figure 6-5**). The third regression was significantly different ( $p < 0.05$ ) from the RC rat-only weight regression when slopes and intercepts were simultaneously compared (F test;  $p = 0.0063$ ). The idea for the further refinement for the rat RC millimole regression came from the evaluation of discordant substances (i.e., those greater than 0.699 or 0.5 log from the regression) when the 3T3 and NHK NRU data were used with the RC millimole regression (see **Appendix L-1**). For the 3T3 NRU, 13/30 (43%) of the discordant substances had mechanisms of toxicity that were not expected to be active in the 3T3 cell cultures. For the NHK NRU, 13/31 (42%) of the discordant substances had mechanisms of toxicity that were not expected to be active in the NHK cell cultures.

#### *Development of the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity*

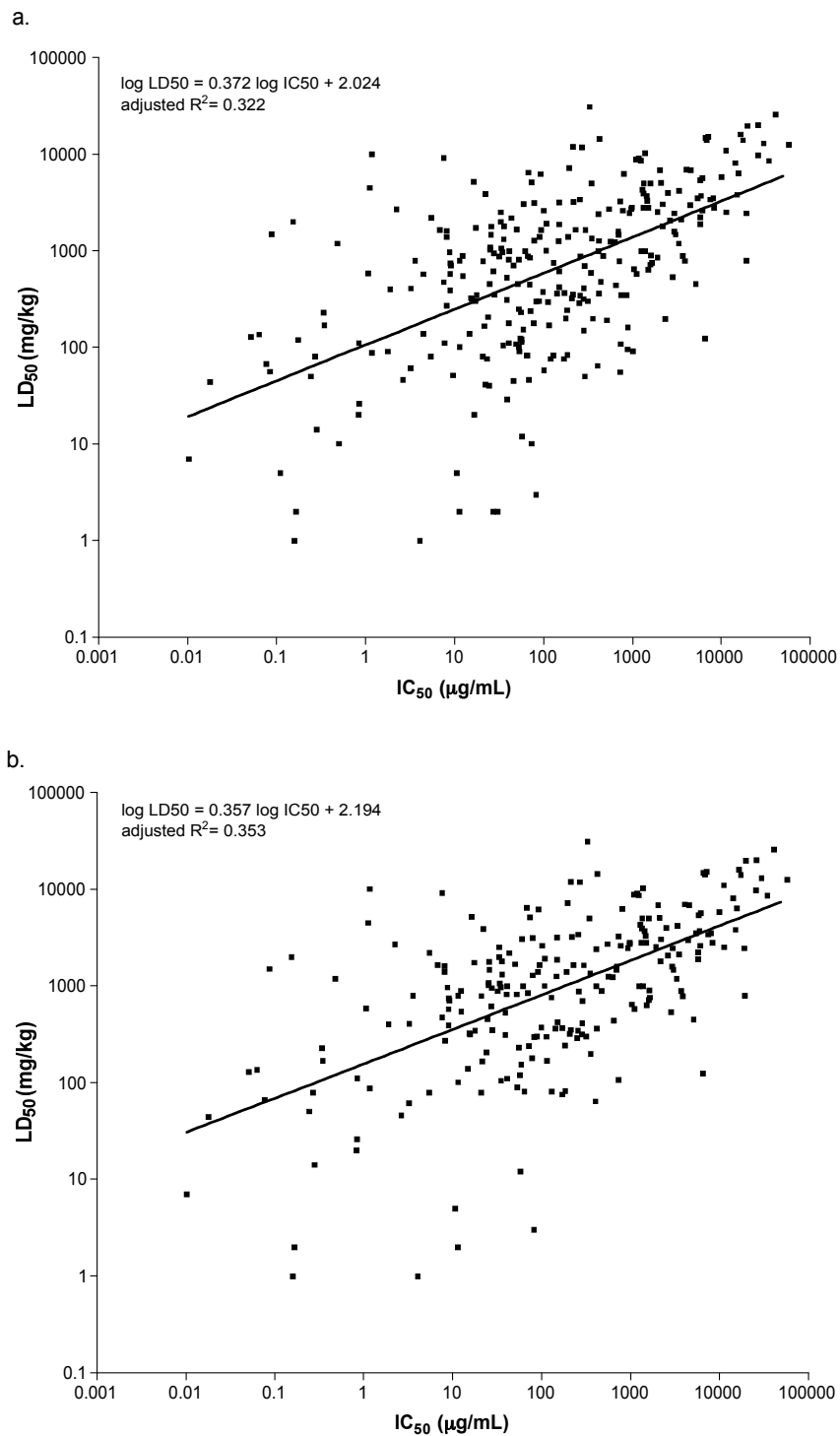
Mechanism of action data for the 282 RC substances with rat LD<sub>50</sub> values were obtained from *Casarett & Doull's Toxicology* (Casarett et al. 2001) and the following Internet sources: HSDB (NLM 2005); Haz-Map (NLM 2005); Pesticide Action Network [PAN] Pesticides Database (PAN North America 2005); and IPCS INTOX Database (Canadian Centre for Occupational Health and Safety 2005) (see **Appendix K-3**). Mechanism of action information could not be found for all substances. For 35 of the 282 (12%) substances, only the product class could be identified; for seven (3%) substances, no information was found. Examination of the RC rat database revealed the following.

- Of the 282 substances, 73 (26%) were outliers<sup>1</sup> (i.e., log observed – log predicted LD<sub>50</sub> > 0.699 as defined for the RC millimole regression).

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<sup>1</sup>Substance “outliers” are often referred to as discordant chemicals. Substance outliers are different from the replicate “outliers” described in **Sections 5.2** and **5.3**, which were extreme values in a set of replicate data. See **Section 13** for definitions.

265 **Figure 6-5 RC Rat-Only Regression (a) and RC Rat-Only Regression after**  
266 **Excluding 50 Substances with Specific Mechanisms of Toxicity (b) Using**  
267 **Weight Units**



268

- For 40 (55%) of the 73 substances, *in vivo* toxicity was underpredicted; for 33 (45%) of the 73 substances, *in vivo* toxicity was overpredicted.
- All underpredicted substances were very toxic, with  $LD_{50} \leq 200$  mg/kg.
- The discordant status of 65% (26/40) of the underpredicted substances could be explained by four general mechanisms
  - neurotoxic (i.e., cholinesterase inhibitor, affects CNS nicotinic receptor, or otherwise neurotoxic by a mechanism other than membrane destabilization such as that produced by a solvent)
  - interferes with energy utilization (i.e., interferes with ATP synthesis, inhibits ADP phosphorylation, or uncouples oxidative phosphorylation, or is a metabolic poison)
  - cardiotoxic via specific mechanisms (i.e., positive inotropic action, calcium channel blocker)
  - alkylates cellular proteins and other macromolecules (i.e., covalently binds to enzymes and other proteins to disrupt normal function)

Substances with such mechanisms would not be expected to exert their toxic mechanisms in the 3T3 and NHK cells and thus, they would be expected to fit the RC millimole regression poorly, as evidenced by their discordant status. A new regression was calculated after the exclusion of all substances in the RC database known to act by these four mechanisms; this included the 26 underpredicted substances and 24 other substances that were not identified as outliers. The substances excluded from the RC rat weight regression are identified in

### Appendix K-3.

## 6.3 Accuracy of the 3T3 and NHK NRU Test Methods for Toxicity Category Predictions

The 3T3 and NHK NRU test methods are not suitable as replacements for acute oral systemic toxicity assays. However, the use of *in vitro* NRU test methods to reduce animal use for acute oral systemic toxicity assays depends upon their accuracy for the prediction of  $LD_{50}$  values. NRU-predicted  $LD_{50}$  values were determined by using the *in vitro* NRU  $IC_{50}$  values

in the regressions presented in **Table 6-2**. The predicted LD<sub>50</sub> values were then used to assign each substance to a predicted GHS acute oral category (UN 2005). The accuracy of the 3T3 and NHK NRU test methods for predicting GHS toxicity categories was determined by comparison with categorization based on *in vivo* rodent LD<sub>50</sub> data. This accuracy evaluation approach was used because the regulatory use of acute systemic toxicity test results is for the purpose of hazard classification and labelling of products to protect handlers and consumers.

The following regressions from **Section 6.2** were evaluated for accuracy of GHS oral toxicity category predictions:

- RC millimole regression
- RC rat-only weight regression
- RC rat-only weight regression excluding substances with specific mechanisms of toxicity

The regression calculated using the rat RC data in millimole units (**Section 6.2.1**) was not evaluated separately since it was very similar to the original RC millimole regression, which used both rat and mouse data. As **Table 6-2** shows, the slopes and intercepts varied only in the thousandths digits.

Data for the same reference substances were evaluated for each regression. Forty-six substances were evaluated for the 3T3 NRU test method and 47 substances were evaluated for the NHK NRU test method. Of the original 72 substances tested, epinephrine bitartrate, colchicine, and propylparaben were excluded because they were removed from the calculation of the RC rat-only weight regression due to the lack of rat oral reference LD<sub>50</sub> data. The 21 substances with specific mechanisms of toxicity in **Table 6-3** were excluded from all analyses to be consistent with those removed from the RC rat-only weight regression excluding substances with specific mechanisms of toxicity. These substances have known mechanisms of toxicity that are not expected to be active in the 3T3 and NHK cell cultures.

**Table 6-3 Substances Deleted from the Evaluations of the 3T3 and NHK NRU Test Methods and Regressions Due to Mechanisms of Toxicity Not Expected to Be Active in the 3T3 and NHK Cell Cultures**

Substance	Mechanism of Toxicity <sup>1</sup>
<b>Neurotoxic</b>	
Amitriptyline HCl	Blocks norepinephrine, 5-hydroxytryptamine, and dopamine presynaptic uptake; prevents reuptake of heart norepinephrine.
Atropine sulfate	Antimuscarinic, anticholinergic action; competitive antagonism of anticholinesterase at cardiac & CNS receptor sites.
Caffeine	Inhibition of phosphodiesterase leading to AMP accumulation, translocation of intracellular Ca <sup>++</sup> , adenosine receptor antagonism, neurotoxic.
Carbamazepine	Therapeutically decreases firing of noradrenergic neurons.
Chloral hydrate	Potential of GABA <sub>A</sub> receptor activity, inhibition of N-methyl-D-aspartate activity, & modulation of 5-hydroxytryptamine <sub>3</sub> receptor-mediated depolarization of the vagus nerve <sup>2</sup> .
Dichlorvos	Inhibition of acetylcholinesterase resulting in acetylcholine accumulation in CNS & effector organs.
Disulfoton	Inhibition of acetylcholinesterase resulting in acetylcholine accumulation in CNS & effector organs.
Endosulfan	Affects brain neurotransmitter levels <sup>3</sup> .
Fenpropathrin	Delays closure of sodium channel causing persistent depolarization of membrane.
Glutethimide	CNS depression, anticholinergic activity.
Haloperidol	Blocks dopamine receptors.
Lindane	CNS depression through inhibition of GABA receptor linked chloride channel at the picrotoxin binding site, leading to blockade of chloride influx into neurons.
Nicotine	Cholinergic block causing polarization of CNS and PNS synapses.
Parathion	Inhibition of acetylcholinesterase resulting in acetylcholine accumulation in CNS & effector organs.
Phenobarbital	CNS depression through inhibition of GABA synapses, inhibits hepatic NADH cytochrome oxidoreductase.
Physostigmine	Inhibition of acetylcholinesterase resulting in acetylcholine accumulation in CNS & effector organs.
Strychnine	Increases glutamic acid in the CNS.
<b>Interferes with Energy Utilization</b>	
Paraquat	Multisystem failure due to depletion of superoxide dismutase, with formation of free radicals & lipid peroxidation; lung fibrosis due to accumulation.
Potassium cyanide	General enzyme inhibition, high affinity for Fe <sup>+++</sup> , inhibits cell respiration by inhibition of cytochrome oxidase.
<b>Cardiotoxic</b>	
Procainamide HCl	Slows impulse conduction in the heart <sup>4</sup> .
Verapamil HCl	Inhibition of transmembrane Ca <sup>++</sup> flux in excitatory tissues, alpha-adrenergic blockade.

Abbreviations: NA = not available or information not found; CNS = central nervous system; GABA = gamma aminobutyric acid; PNS = peripheral nervous system; NADH = nicotine adenine dinucleotide (reduced).

<sup>1</sup>Ekwall et al. (1998) or Hazardous Substances Data Bank (NLM 2001, 2002) unless otherwise noted.

<sup>2</sup>EPA (2000b).

<sup>3</sup>ATSDR (2000a).

<sup>4</sup>Hardman et al. (1996).



Carbon tetrachloride and methanol were excluded from the 3T3 NRU evaluations because no laboratory attained sufficient toxicity in any test for the calculation of an  $IC_{50}$ . Carbon tetrachloride was also excluded from the NHK NRU evaluations because no laboratory attained sufficient toxicity in any test for the calculation of an  $IC_{50}$ .

The tables providing accuracy information in this section (**Tables 6-4 to 6-6**) are divided into top and bottom parts that provide accuracy data for the 3T3 and NHK NRU test methods, respectively. For each part, the toxicity categories corresponding to the *in vivo*  $LD_{50}$  data are provided in rows that are labeled on the far left side of the table. The toxicity categories predicted by the *in vitro* NRU assays (and associated regressions) are provided in columns that are labeled across the top of each part (i.e., 3T3 or NHK NRU-predicted toxicity category) of the table. The numbers at the intersections of the *in vivo*  $LD_{50}$  rows and 3T3 or NHK NRU-predicted toxicity category columns are the numbers of substances with *in vitro* category predictions that correspond to the various *in vivo* categories. The right sides of the tables also provide summaries containing, for each *in vivo* toxicity category and for the total number of substances evaluated: number of substances, the accuracy of the 3T3 or NHK NRU prediction, and the percentage of substances for which toxicity has been overpredicted and underpredicted by the *in vitro* NRU methods. In each of the 3T3 NRU and NHK NRU sections of the table, a summary of predictivity<sup>2</sup> is also provided for each predicted toxicity category along with the percentage of substances with category (i.e., toxicity) underpredicted and overpredicted.

#### 6.3.1 Prediction of Toxicity Category by the 3T3 and NHK NRU Test Methods Using the RC Millimole Regression

**Table 6-4** shows the concordance of the observed (i.e., *in vivo*) and predicted GHS acute oral toxicity categories (UN 2005) for each *in vitro* NRU cytotoxicity test method using the geometric mean  $IC_{50}$  values (of the three laboratories) in the RC millimole regression,  $\log LD_{50} \text{ (mmol/kg)} = 0.435 \times \log IC_{50} \text{ (mM)} + 0.625$ . Accuracy is the agreement of the

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<sup>2</sup> Proportion of *in vivo* category matches for all substances with *in vitro* predictions for a particular category. Predictivity is an indicator of test accuracy (ICCVAM 2003).

**Table 6-4 Prediction of GHS Toxicity Category<sup>1</sup> by the 3T3 and NHK NRU Test Methods and the RC Millimole Regression<sup>2</sup>**

Reference Rodent LD <sub>50</sub> <sup>3</sup>	3T3 NRU-Predicted Toxicity Category						Total	Accuracy	Toxicity Overpredicted	Toxicity Underpredicted
	< 5	5 – 50	50 – 300	300 – 2000	2000 – 5000	> 5000				
< 5	0	3	1	3	0	0	7 <sup>4</sup>	0%	0%	100%
5 – 50	0	1	3	1	1	0	6 <sup>5</sup>	17%	0%	83%
50 – 300	0	0	4	2	0	0	6 <sup>6</sup>	67%	0%	33%
300 – 2000	0	0	0	6	0	0	6 <sup>7</sup>	100%	0%	0%
2000 – 5000	0	0	0	11	0	0	11 <sup>8</sup>	0%	100%	0%
> 5000	0	0	0	6	3	1	10 <sup>9,10</sup>	10%	90%	0%
Total	0	4	8	29	4	1	46	26%	43%	30%
Predictivity	0%	25%	50%	21%	0%	100%				
Category Underpredicted	0%	0%	0%	59%	75%	0%				
Category Overpredicted	0%	75%	50%	21%	25%	0%				
Reference Rodent LD <sub>50</sub> <sup>3</sup>	NHK NRU-Predicted Toxicity Category						Total	Accuracy	Toxicity Overpredicted	Toxicity Underpredicted
	< 5	5 – 50	50 – 300	300 – 2000	2000 – 5000	> 5000				
< 5	0	1	3	2	1	0	7 <sup>4</sup>	0%	0%	100%
5 – 50	0	3	3	0	0	0	6 <sup>5</sup>	50%	0%	50%
50 – 300	0	1	3	2	0	0	6 <sup>6</sup>	50%	17%	33%
300 – 2000	0	0	0	6	0	0	6 <sup>7</sup>	100%	0%	0%
2000 – 5000	0	0	0	10	1	0	11 <sup>8</sup>	9%	91%	0%
> 5000	0	0	0	6	5	0	11 <sup>10</sup>	0%	100%	0%
Total	0	5	9	26	7	0	47	28%	47%	26%
Predictivity	0%	60%	33%	23%	14%	0%				
Category Underpredicted	0%	20%	0%	62%	71%	0%				
Category Overpredicted	0%	20%	67%	15%	14%	0%				

<sup>1</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

< 5: LD<sub>50</sub> ≤ 5 mg/kg

5 – 50: 5 < LD<sub>50</sub> ≤ 50 mg/kg

50 – 300: 50 < LD<sub>50</sub> ≤ 300 mg/kg

300 – 2000: 300 < LD<sub>50</sub> ≤ 2000 mg/kg

2000 – 5000: 2000 < LD<sub>50</sub> ≤ 5000 mg/kg

> 5000: LD<sub>50</sub> > 5000 mg/kg

<sup>2</sup>The RC millimole regression is  $\log \text{LD}_{50} (\text{mmol/kg}) = \log \text{IC}_{50} (\text{mM}) \times 0.435 + 0.625$ . Numbers in table represent number of substances.

<sup>3</sup>Reference oral LD<sub>50</sub> values from **Table 3-2**.

<sup>4</sup>Epinephrine bitartrate excluded because no rat LD<sub>50</sub> was identified. Disulfoton, parathion, strychnine and physostigmine excluded based on mechanism of toxicity (see **Table 6-3**).

<sup>5</sup>Colchine excluded because no rat LD<sub>50</sub> was identified. Dichlorvos, endosulfan, fenpropathrin, nicotine, and potassium cyanide excluded based on mechanism of toxicity (see **Table 6-3**).

<sup>6</sup>Caffeine, haloperidol, lindane, paraquat, phenobarbital, and verapamil HCl excluded based on mechanism of toxicity (see **Table 6-3**).

<sup>7</sup>Amitriptyline, atropine sulfate, carbamazepine, chloral hydrate, glutethimide, and procainamide HCl excluded based on mechanism of toxicity (see **Table 6-3**).

<sup>8</sup>Carbon tetrachloride excluded because no laboratory attained sufficient toxicity for the calculation of an IC<sub>50</sub>.

<sup>9</sup>Methanol excluded because no laboratory attained sufficient toxicity for the calculation of an IC<sub>50</sub>.

<sup>10</sup>Propylparaben excluded because no rat LD<sub>50</sub> was identified.

category predictions with those based on the reference rodent LD<sub>50</sub> values in **Table 3-2**, which are the values used for the original classification of the test substances. Substances for which the *in vitro* toxicity category prediction does not match the *in vivo* determined toxicity category are considered discordant substances for the GHS toxicity category predictions.

#### *In Vitro – In Vivo Concordance Using the RC Millimole Regression*

The overall accuracy of the 3T3 NRU test method for correctly predicting GHS toxicity classification category using the RC millimole regression was 26% (12/46 substances) (**Table 6-4**). *In vivo* toxicity was overpredicted for 43% (20) and underpredicted for 30% (14) of the 46 substances. For this analysis, in terms of each GHS toxicity classification category:

- 0 (0%) of seven substances with LD<sub>50</sub> < 5 mg/kg was correctly predicted
- 1 (17%) of six substances in the 5 < LD<sub>50</sub> ≤ 50 mg/kg category was correctly predicted
- 4 (67%) of six substances in the 50 < LD<sub>50</sub> ≤ 300 mg/kg category were correctly predicted
- 6 (100%) of six substances in the 300 < LD<sub>50</sub> ≤ 2000 mg/kg category were correctly predicted; however, this toxicity category was also predicted for 23 other substances (79%; 23/29) that did not match this category *in vivo*. Thus, the predictivity for this category was 21% (6/29 substances predicted for this category matched the *in vivo* category).
- 0 (0%) of the 11 substances in the 2000 < LD<sub>50</sub> ≤ 5000 mg/kg category were correctly predicted
- 1 (10%) of the 10 substances in the LD<sub>50</sub> > 5000 mg/kg range was correctly predicted

The overall accuracy of the NHK NRU cytotoxicity test method for correctly predicting the GHS toxicity classification, when the prediction was based on the RC millimole regression, was 28% (13/47 substances) (see **Table 6-4**). Toxicity was overpredicted for 47% (22) and underpredicted for 26% (12) of the 47 substances. The pattern of concordance between *in vitro* and *in vivo* results for the NHK assay with the RC millimole regression was similar to

the 3T3 results with the exception that two more substances were correctly in the  $5 < LD_{50} \leq 50$  mg/kg category. For this analysis, in terms of each GHS toxicity classification category:

- 0 (0%) of seven substances with  $LD_{50} < 5$  mg/kg were correctly predicted
- 3 (50%) of six substances in the  $5 < LD_{50} \leq 50$  mg/kg and in the  $50 < LD_{50} \leq 300$  mg/kg categories were correctly predicted
- 6 (100%) of six substances in the  $300 < LD_{50} \leq 2000$  mg/kg category were correctly predicted; however, this toxicity category was also predicted for 20 (77%; 20/26) other substances with *in vivo* data that did not match the category. Thus, the predictivity for this category was 23%.
- 1 (9%) of 11 substances in the  $2000 < LD_{50} \leq 5000$  mg/kg category was correctly predicted
- 0 (0%) of 11 substances in the  $LD_{50} > 5000$  mg/kg range were correctly predicted.

For both *in vitro* NRU cytotoxicity test methods, when predicted GHS toxicity categories did not match the reference rodent GHS toxicity category, the RC millimole regression generally underpredicted toxicity for substances in the highest toxicity (i.e., lowest  $LD_{50}$ ) categories and overpredicted toxicity for substances in the lowest toxicity (i.e., highest  $LD_{50}$ ) categories (see **Table 6-4**). While substances at the very low and very high ends of the toxicity range were poorly predicted, those in the middle of the toxicity range (i.e.,  $300 < LD_{50} \leq 2000$  mg/kg) were predicted quite well.

#### *Discordant Substances for Prediction of Toxicity Category by the 3T3 and NHK NRU Test Methods and the RC Millimole Regression*

**Appendix L-2** identifies the discordant substances for which the *in vitro* predicted GHS toxicity category did not match the GHS toxicity category assigned based on the reference rodent  $LD_{50}$  data in **Table 3-2**. For the 3T3 NRU test method, the toxicity was underpredicted for 14 (30%) and overpredicted for 20 (43%) of the 34 discordant substances. For the NHK NRU test method, toxicity was underpredicted for 12 (35%) and overpredicted for 22 (65%) of the 34 discordant substances. The fact that there were more substances for which toxicity was overpredicted is a result of the removal of substances with specific

mechanisms of toxicity that were not expected to be active in the 3T3 and NHK cell cultures. The toxicity for most of these substances would have been underpredicted. **Figure 3-1** shows that most of the RC substances selected for testing in the NICEATM/ECVAM validation study are below the RC millimole regression line. Thus, the RC millimole regression is expected to predict lower toxicity (i.e., a higher LD<sub>50</sub>) for these substances.

### 6.3.2 Prediction of Toxicity Category by the 3T3 and NHK NRU Test Methods Using the RC Rat-Only Weight Regression

**Table 6-5** shows the concordance of the observed and predicted GHS acute oral toxicity categories for each *in vitro* NRU test method using the geometric mean IC<sub>50</sub> values (of the three laboratories) and the RC rat only weight regression from **Table 6-2**. The regression formula for the RC rat-only weight regression was  $\log \text{LD}_{50} (\text{mg/kg}) = \log \text{IC}_{50} (\mu\text{g/mL}) \times 0.372 + 2.024$ . Accuracy is the agreement of the *in vitro* NRU cytotoxicity GHS toxicity category predictions with those based on the reference rat oral LD<sub>50</sub> values from **Table 4-2**.

#### *In Vitro – In Vivo Concordance with the RC Rat-Only Weight Regression*

The overall accuracy of the 3T3 NRU test method with the RC rat-only weight regression was 35% (16) for the results from 46 substances (**Table 6-5**). The toxicity was overpredicted for 41% (19) and underpredicted for 24% (11) of the 46 substances. For this analysis, in terms of each GHS toxicity classification category:

- 0 (0%) of four substances with LD<sub>50</sub> < 5 mg/kg were correctly predicted
- 1 (14%) of seven substances in the 5 < LD<sub>50</sub> ≤ 50 mg/kg GHS toxicity category was correctly predicted
- 4 (80%) of five substances in the 50 < LD<sub>50</sub> ≤ 300 mg/kg GHS toxicity category were correctly predicted; however, since seven other substances were also predicted for this category, the predictivity was 36% (4/11)
- 7 (78%) of nine substances in the 300 < LD<sub>50</sub> ≤ 2000 mg/kg GHS toxicity category were predicted correctly. Since a total of 22 substances were predicted for this category, the predictivity was 32% (7/22).

481 **Table 6-5 Prediction of GHS Toxicity Category<sup>1</sup> by the RC Rat-Only Weight Regression<sup>2</sup>**

Reference Rodent LD <sub>50</sub> <sup>3</sup>	3T3 NRU-Predicted Toxicity Category						Total	Accuracy	Toxicity Overpredicted	Toxicity Underpredicted
	< 5	5 – 50	50 – 300	300-2000	2000-5000	> 5000				
< 5	0	0	2	2	0	0	4 <sup>4</sup>	0%	0%	100%
5 – 50	0	1	4	2	0	0	7 <sup>5</sup>	14%	0%	86%
50 – 300	0	0	4	1	0	0	5 <sup>6</sup>	80%	0%	20%
300 – 2000	0	1	1	7	0	0	9 <sup>7</sup>	78%	22%	0%
2000 – 5000	0	0	0	5	4	0	9 <sup>8</sup>	44%	56%	0%
> 5000	0	0	0	5	7	0	12 <sup>9,10</sup>	0%	100%	0%
Total	0	2	11	22	11	0	46	35%	41%	24%
Predictivity	0%	50%	36%	32%	36%	0%				
Category Underpredicted	0%	50%	9%	46%	64%	0%				
Category Overpredicted	0%	0%	55%	23%	0%	0%				
Reference Rodent LD <sub>50</sub> <sup>3</sup>	NHK NRU-Predicted Toxicity Category						Total	Accuracy	Toxicity Overpredicted	Toxicity Underpredicted
	< 5	5 – 50	50 – 300	300 – 2000	2000 – 5000	> 5000				
< 5	0	1	2	1	0	0	4 <sup>4</sup>	0%	0%	100%
5 – 50	0	1	4	2	0	0	7 <sup>5</sup>	14%	0%	86%
50 – 300	0	1	3	1	0	0	5 <sup>6</sup>	60%	20%	20%
300 – 2000	0	1	0	8	0	0	9 <sup>7</sup>	89%	11%	0%
2000 – 5000	0	0	0	8	1	0	9 <sup>8</sup>	11%	89%	0%
> 5000	0	0	0	6	6	1	13 <sup>10</sup>	8%	92%	0%
Total	0	4	9	26	7	1	47	30%	47%	23%
Predictivity	0%	25%	33%	31%	14%	100%				
Category Underpredicted	0%	50%	0%	54%	86%	0%				
Category Overpredicted	0%	25%	67%	15%	0%	0%				

<sup>1</sup>Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

< 5: LD<sub>50</sub> ≤ 5 mg/kg

5 – 50: 5 < LD<sub>50</sub> ≤ 50 mg/kg

50 – 300: 50 < LD<sub>50</sub> ≤ 300 mg/kg

486 300 – 2000:  $300 < LD_{50} \leq 2000 \text{ mg/kg}$

487 2000 – 5000:  $2000 < LD_{50} \leq 5000 \text{ mg/kg}$

488 > 5000:  $LD_{50} > 5000 \text{ mg/kg}$

489 <sup>2</sup>The RC rat-only weight regression is  $\log LD_{50} (\text{mg/kg}) = \log IC_{50} (\mu\text{g/mL}) \times 0.372 + 2.024$ .

490 <sup>3</sup>Reference rodent  $LD_{50}$  values from **Table 4-2**.

491 <sup>4</sup>Epinephrine bitartrate excluded because no rat  $LD_{50}$  was identified. Disulfoton and physostigmine excluded based on  
492 mechanism of toxicity (see **Table 6-3**).

493 <sup>5</sup>Colchicine excluded because no rat  $LD_{50}$  was identified. Endosulfan, parathion, potassium cyanide, and strychnine excluded based  
494 on mechanism of toxicity (see **Table 6-3**).

495 <sup>6</sup>Dichlorvos, fenpropathrin, lindane, paraquat, phenobarbital, nicotine, and verapamil HCl excluded based on mechanism of  
496 toxicity (see **Table 6-3**).

497 <sup>7</sup>Amitriptyline, atropine sulfate, caffeine, chloral hydrate, glutethimide, haloperidol, and procainamide HCl excluded based on  
498 mechanism of toxicity (see **Table 6-3**).

499 <sup>8</sup>Carbon tetrachloride excluded because no laboratory attained sufficient toxicity for the calculation of an  $IC_{50}$ . Carbamazepine  
500 excluded based on mechanism of toxicity (see **Table 6-3**).

501 <sup>9</sup>Methanol excluded because no laboratory attained sufficient toxicity for the calculation of an  $IC_{50}$ .

502 <sup>10</sup>Propylparaben excluded because no rat  $LD_{50}$  was identified.



- 4 (44%) of nine substances in the  $2000 < LD_{50} \leq 5000$  mg/kg GHS toxicity category were correctly predicted; however, since a total of 11 substances were predicted for this category, the predictivity was 36% (4/11).
- 0 (0%) of 12 substances with  $LD_{50} > 5000$  mg/kg were correctly predicted

The overall accuracy of the NHK NRU test method with the RC rat-only weight regression was 30% [14 /47]) (**Table 6-5**). Toxicity was overpredicted for 47% (22) and underpredicted for 23% (11) of the 47 substances, compared with *in vivo* toxicity categories (i.e., the GHS categories for the reference  $LD_{50}$  values in **Table 4-2**). For this analysis, in terms of each GHS toxicity classification category:

- 0 (0%) of four substances with  $LD_{50} < 5$  mg/kg were correctly predicted
- 1 (14%) of seven substances in the  $5 < LD_{50} \leq 50$  mg/kg GHS toxicity category was correctly predicted
- 3 (60%) of five substances in the  $50 < LD_{50} \leq 300$  mg/kg GHS toxicity category were correctly predicted; however, since six other substances were also predicted for this category, the predictivity was 33% (3/9)
- 8 (89%) of nine substances in the  $300 < LD_{50} \leq 2000$  mg/kg GHS toxicity category were predicted correctly; however, since 18 other substances were also predicted for this category, the predictivity was 31% (8/26)
- 1 (11%) of nine substances in the  $2000 < LD_{50} \leq 5000$  mg/kg GHS toxicity category was correctly predicted
- 1 (8%) of 13 substances with  $LD_{50} > 5000$  mg/kg was correctly predicted

#### *Discordant Substances for Prediction of Toxicity Category by the 3T3 and NHK NRU Test Methods and the RC Rat-Only Weight Regression*

**Appendix L-2** shows the discordant substances for which the *in vitro* predicted GHS toxicity category did not match that based on the reference rodent  $LD_{50}$  data using the RC rat-only weight regression. The two *in vitro* NRU cytotoxicity test methods over- and under-predicted the GHS toxicity category for a similar number of substances, compared with the GHS toxicity categories for the reference  $LD_{50}$  values in **Table 4-2**. For the 3T3 NRU test method, the GHS toxicity category of 19 (63%) of 30 discordant substances was

overpredicted and the GHS toxicity category of 11 (37%) substances was underpredicted. For the NHK NRU test method, the GHS toxicity category of 22 (67%) of 33 discordant substances was overpredicted and the toxicity of 11 (33%) discordant substances was underpredicted.

### 6.3.3 Prediction of Toxicity Category by the 3T3 and NHK NRU Test Methods with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity

**Table 6-6** shows the concordance of the observed and predicted GHS acute oral toxicity categories for each *in vitro* NRU test method using the geometric mean IC<sub>50</sub> values (of the three laboratories) and the RC rat-only weight regression after excluding substances with specific mechanisms of toxicity (see **Table 6-3**). The formula for this regression was  $\log LD_{50} \text{ (mg/kg)} = \log IC_{50} \text{ (}\mu\text{g/mL)} \times 0.357 + 2.194$ . Accuracy is the agreement of the *in vitro* predicted GHS toxicity categories with those based on the reference rat oral LD<sub>50</sub> values from **Table 4-2**.

#### *In Vitro – In Vivo Concordance for the 3T3 and NHK NRU Test Methods with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity*

- The overall accuracy of the 3T3 NRU test method with the RC rat-only weight regression after excluding substances with specific mechanisms of toxicity was 46% (21/46 substances) (**Table 6-6**), compared to 35% (16/46 substances) when the complete RC rat-only weight regression was used (**Section 6.3.2** and **Table 6-5**). **Table 6-6** shows that GHS toxicity category was overpredicted for 24% (19) and underpredicted for 30% (11) of the 46 substances compared with the *in vivo* GHS toxicity categories for the reference LD<sub>50</sub> values in **Table 4-2**.

In terms of each GHS toxicity classification category:

- 0 (0%) of the four substances with LD<sub>50</sub> < 5 mg/kg were correctly predicted
- 1 (14%) of seven substances in the 5 < LD<sub>50</sub> ≤ 50 mg/kg GHS toxicity category was correctly predicted

565 **Table 6-6 Prediction of GHS Toxicity Categories<sup>1</sup> by RC Rat-Only Weight Regression Excluding**  
 566 **Substances with Specific Mechanisms of Toxicity<sup>2</sup>**

Reference Rodent LD <sub>50</sub> <sup>3</sup>	3T3 NRU-Predicted Toxicity Category						Total	Accuracy	Toxicity Overpredicted	Toxicity Underpredicted
	< 5	5 – 50	50 – 300	300-2000	2000-5000	> 5000				
< 5	0	0	2	2	0	0	4 <sup>4</sup>	0%	100%	0%
5 – 50	0	1	4	2	0	0	7 <sup>5</sup>	14%	86%	0%
50 – 300	0	0	4	1	0	0	5 <sup>6</sup>	80%	20%	0%
300 – 2000	0	1	1	7	0	0	9 <sup>7</sup>	78%	0%	22%
2000 – 5000	0	0	0	3	6	0	9 <sup>8</sup>	67%	0%	33%
> 5000	0	0	0	5	4	3	12 <sup>9,10</sup>	25%	0%	75%
Total	0	2	11	20	10	3	46	46%	24%	30%
Predictivity	0%	50%	36%	35%	60%	100%				
Category Underpredicted	0%	50%	9%	40%	40%	0%				
Category Overpredicted	0%	0%	55%	25%	0%	0%				
Reference Rodent LD <sub>50</sub> <sup>3</sup>	NHK NRU-Predicted Toxicity Category						Total	Accuracy	Toxicity Overpredicted	Toxicity Underpredicted
	< 5	5 – 50	50 – 300	300 – 2000	2000 – 5000	> 5000				
< 5	0	0	2	2	0	0	4 <sup>4</sup>	0%	100%	0%
5 – 50	0	1	4	2	0	0	7 <sup>5</sup>	14%	86%	0%
50 – 300	0	1	3	1	0	0	5 <sup>6</sup>	60%	20%	20%
300 – 2000	0	1	0	8	0	0	9 <sup>7</sup>	89%	0%	11%
2000 – 5000	0	0	0	5	4	0	9 <sup>8</sup>	44%	0%	56%
> 5000	0	0	0	4	7	2	13 <sup>10</sup>	15%	0%	85%
Total	0	3	9	22	11	2	47	38%	23%	38%
Predictivity	0%	33%	33%	36%	36%	100%				
Category Underpredicted	0%	67%	0%	41%	64%	0%				
Category Overpredicted	0%	33%	67%	23%	0%	0%				

<sup>1</sup>Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

569 < 5:  $LD_{50} \leq 5 \text{ mg/kg}$   
 570 5 – 50:  $5 < LD_{50} \leq 50 \text{ mg/kg}$   
 571 50 – 300:  $50 < LD_{50} \leq 300 \text{ mg/kg}$   
 572 300 – 2000:  $300 < LD_{50} \leq 2000 \text{ mg/kg}$   
 573 2000 – 5000:  $2000 < LD_{50} \leq 5000 \text{ mg/kg}$   
 574 > 5000:  $LD_{50} > 5000 \text{ mg/kg}$   
 575 <sup>2</sup>The RC rat-only weight regression excluding substances with specific mechanisms of toxicity is  $\log LD_{50} (\text{mg/kg}) = \log IC_{50}$   
 576  $(\mu\text{g/mL}) \times 0.357 + 2.194$ .  
 577 <sup>3</sup>Reference rodent  $LD_{50}$  values from **Table 4-2**.  
 578 <sup>4</sup>Epinephrine bitartrate excluded because no rat  $LD_{50}$  was identified. Disulfoton and physostigmine excluded based on  
 579 mechanism of toxicity (see **Table 6-3**).  
 580 <sup>5</sup>Colchicine excluded because no rat  $LD_{50}$  was identified. Endosulfan, parathion, potassium cyanide, and strychnine excluded based  
 581 on mechanism of toxicity (see **Table 6-3**).  
 582 <sup>6</sup>Dichlorvos, fenpropathrin, lindane, paraquat, phenobarbital, nicotine, and verapamil HCl excluded based on mechanism of  
 583 toxicity (see **Table 6-3**).  
 584 <sup>7</sup>Amitriptyline, atropine sulfate, caffeine, chloral hydrate, glutethimide, haloperidol, and procainamide HCl excluded based on  
 585 mechanism of toxicity (see **Table 6-3**).  
 586 <sup>8</sup>Carbon tetrachloride excluded because no laboratory attained sufficient toxicity for the calculation of an  $IC_{50}$ . Carbamazepine  
 587 excluded based on mechanism of toxicity (see **Table 6-3**).  
 588 <sup>9</sup>Methanol excluded because no laboratory attained sufficient toxicity for the calculation of an  $IC_{50}$ .  
 589 <sup>10</sup>Propylparaben excluded because no rat  $LD_{50}$  was identified.  
 590

- 4 (80%) of five substances in the  $50 < LD_{50} \leq 300$  mg/kg GHS toxicity category were correctly predicted. Since seven other substances were also predicted for this category, predictivity was 36% (4/11).
- 7 (78%) of nine substances in the  $300 < LD_{50} \leq 2000$  mg/kg GHS toxicity category were predicted correctly. Since a total of 20 substances were predicted for this category, the predictivity was 35% (7/20).
- 6 (67%) of nine substances in the  $2000 < LD_{50} \leq 5000$  mg/kg GHS toxicity category were correctly predicted; the predictivity of this category was 60% (6/10)
- 3 (25%) of 12 substances with  $LD_{50} > 5000$  mg/kg were correctly predicted. Since no other substances were predicted for this category, the predictivity was 100% (3/3).

**Table 6-6** shows that the accuracy of the NHK NRU test method with the RC rat-only weight regression excluding substances with specific mechanisms of toxicity was 38% (18/47), compared to the 30% (14/47) accuracy when the complete RC rat-only weight regression was used (see **Table 6-5**). Toxicity was overpredicted for 23% (11) and underpredicted for 38% (19) of the 47 substances compared with the *in vivo* GHS categories for the reference  $LD_{50}$  values in **Table 4-2**. In terms of each GHS toxicity classification category:

- 0 (0%) of the four substances with  $LD_{50} < 5$  mg/kg were correctly predicted
- 1 (14%) of seven substances in the  $5 < LD_{50} \leq 50$  mg/kg GHS toxicity category was correctly predicted
- 3 (60%) of five substances in the  $50 < LD_{50} \leq 300$  mg/kg GHS toxicity category were correctly predicted. Since six other substances were also predicted for this category, predictivity was 33% (3/9).
- 8 (89%) of nine substances in the  $300 < LD_{50} \leq 2000$  mg/kg GHS toxicity category were predicted correctly. Since 14 other substances that did not match this category were also predicted, predictivity was 36% (8/22).
- 4 (44%) of nine substances in the  $2000 < LD_{50} \leq 5000$  mg/kg GHS toxicity category were correctly predicted; the predictivity of this category was 36% (4/11)

- 2 (15%) of 13 substances with LD<sub>50</sub> > 5000 mg/kg were correctly predicted. Since no other substances were predicted for this category, the predictivity was 100% (2/2).

*Discordant Substances for the Prediction of Toxicity Category by the 3T3 and NHK NRU Test Methods and the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity*

**Appendix L-2** shows the discordant substances for which the *in vitro* NRU predicted toxicity category did not match that based on the reference rodent LD<sub>50</sub> data. The NHK NRU test method had four more discordant substances than the corresponding assay using 3T3 cells when the IC<sub>50</sub> results were applied to the RC rat-only weight regression excluding substances with specific mechanisms of toxicity. For the 3T3 NRU test method, the GHS toxicity category of 19 (63%) of 30 discordant substances was overpredicted while the toxicity of 11 (37%) of 30 discordant substances was underpredicted compared with the *in vivo* GHS toxicity categories for the reference LD<sub>50</sub> values in **Table 4-2**. For the NHK NRU test method, the toxicity of 22 (65%) of 34 discordant substances was overpredicted while the toxicity of 12 (35%) of 34 discordant substances was underpredicted.

**6.3.4** Summary of the Regressions Evaluated

**Table 6-7** summarizes the regressions evaluated in **Section 6.3** for accuracy in predicting the GHS acute oral toxicity categories (UN 2005) and the proportion of discordant substances for *in vitro* predictions of GHS toxicity categories. Accuracy for the 3T3 NRU test method was slightly lower than that for the NHK NRU test method for the RC millimole regression (i.e., 26% vs. 28%). Accuracy for the 3T3 NRU test method was higher than that for the NHK NRU test method for the RC rat-only weight regression (i.e., 35% vs. 30%) and the RC rat-only weight regression excluding substances with specific mechanisms of toxicity (i.e., 46% vs. 38%). The proportion of discordant substances for the 3T3 NRU test method was higher for the RC millimole regression (74%) than it was for the RC rat-only weight (65%) regression and the RC rat-only weight regression excluding substances with specific mechanisms of toxicity (65%). The proportion of discordant substances for the NHK NRU test method was similar for each regression (i.e., 70-72%). **Table 6-7** shows that the

difference between the proportions of discordant substances for the 3T3 and NHK NRU test methods widened with each subsequent regression (74% vs. 72% for the RC millimole regression, 65% vs. 70% for the RC rat-only weight regression, and 65% vs. 72% for the RC rat-only weight regression excluding substances with specific mechanisms of toxicity).

**Table 6-7 Comparison of Regressions and *In Vitro* NRU Test Methods for Performance in Predicting GHS<sup>a</sup> Toxicity Categories**

Regression	N <sup>b</sup>	Adjusted R <sup>2</sup>	Accuracy	Discordant Substances <sup>c</sup>
RC –millimole units	347	0.450 <sup>d</sup>	3T3 – 26% NHK – 28%	3T3 – 34/46 (74%) NHK – 34/47 (72%)
RC rat only –weight units <sup>c</sup>	282	0.322	3T3 – 35% NHK – 30%	3T3 – 30/46 (65%) NHK – 33/47 (70%)
RC rat only excluding substances with specific mechanisms of action – weight units <sup>c</sup>	232	0.353	3T3 – 46% NHK – 38%	3T3 – 30/46 (65%) NHK – 34/47 (72%)

<sup>a</sup>Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

<sup>b</sup>Number of substances used in regression.

<sup>c</sup>Proportion of substances evaluated.

<sup>d</sup>Calculated from RC data (i.e., regression not reported by Halle [1998]).

<sup>e</sup>From Table 6-1.

The highest accuracy for both *in vitro* NRU cytotoxicity test methods was attained when using the RC rat-only weight regression excluding substances with specific mechanisms of toxicity. The accuracy for the 3T3 NRU test method was 46%, which was greater than the accuracy of the 3T3 NRU with the RC millimole regression (26%) and with the RC rat-only weight regression (35%). The accuracy for the NHK NRU test method was 38% for the RC rat-only weight regression excluding substances with specific mechanisms of toxicity, 28% with the RC millimole regression, and 30% with the RC rat-only weight regression.

#### **6.4 Strengths and Limitations of the *In Vitro* NRU Cytotoxicity Test Methods for *In Vivo* Toxicity Prediction**

For each regression evaluated, the NRU basal cytotoxicity test methods tended to underpredict the toxicity of the most toxic substances and to overpredict the toxicity of the least toxic substances. The 3T3 and NHK NRU test methods were better at predicting the toxicity of substances with  $50 < LD_{50} \leq 300$  mg/kg and  $300 < LD_{50} \leq 2000$  mg/kg than

predicting the toxicity of substances with higher or lower LD<sub>50</sub> values. The accuracy for the RC millimole regression and the RC rat-only weight regression for these toxicity categories was 67-100% for the 3T3 NRU and 33-83% for the NHK NRU data. Substances with higher or lower LD<sub>50</sub> values were infrequently predicted correctly. The accuracy for substances with LD<sub>50</sub> ≤ 50 mg/kg (GHS toxicity categories for LD<sub>50</sub> ≤ 5 mg/kg and 5 < LD<sub>50</sub> ≤ 50 mg/kg) was 0-17% for the 3T3 NRU and 0-50% for the NHK NRU with the same regressions. Accuracy for substances in the 2000 < LD<sub>50</sub> ≤ 5000 and LD<sub>50</sub> > 5000 mg/kg toxicity categories was 0-44% for the 3T3 NRU and 0-11% for the NHK NRU.

The RC rat-only weight regression calculated after removal of substances with specific mechanisms of toxicity improved the accuracy of GHS toxicity category predictions for substances with LD<sub>50</sub> > 2000 mg/kg compared with the accuracy for the other regressions. The accuracy for substances in these categories was 25-67% for the 3T3 NRU and 15-44% for the NHK NRU. The RC rat-only weight regression excluding substances with specific mechanisms of toxicity did not increase the accuracy for substances with LD<sub>50</sub> < 2000 mg/kg. However, the accuracy for substances in the 50 < LD<sub>50</sub> ≤ 300 mg/kg and 300 < LD<sub>50</sub> ≤ 2000 mg/kg categories using the RC millimole regression and the RC rat-only weight regression was already quite high. The accuracy for predicting these categories using the RC rat-only weight regression excluding substances with specific mechanisms of toxicity was 78-80% for the 3T3 NRU and 60-89% for the NHK NRU. The accuracy for predicting the toxicity categories for LD<sub>50</sub> ≤ 5 mg/kg and 5 < LD<sub>50</sub> ≤ 50 mg/kg was 0-14% for both the 3T3 NRU test methods when using the RC rat-only weight regression excluding substances with specific mechanisms of toxicity.

The analysis of the 30 (3T3 NRU) to 31 (NHK NRU) discordant substances for the RC millimole regression to determine the physical, chemical, and biological characteristics associated with the discordant substances is presented in **Appendix L-1**. The analysis showed that 3 of 3 (100%) organophosphates were discordant in both test methods (10% of the 30 [3T3 NRU] to 31 [NHK NRU] discordant substances). Other characteristics that seemed promising for characterizing RC millimole regression outliers were boiling point, molecular weight, and log K<sub>ow</sub>. For boiling points > 200°C, 9/13 substances (69%) were



outliers for both the 3T3 results NHK NRU results (29 and 26% of the outliers, respectively). The toxicity of seven of the nine (78%) outliers with boiling points > 200°C was underpredicted by the RC millimole regression and the toxicity of the other two (22%) substances was overpredicted. For molecular weight > 400 g/mole, 5/7 (71%) substances were outliers using the 3T3 data and 3/7 (43%) were outliers using the NHK data (17 and 10% of the outliers, respectively). The toxicity of all the outliers with molecular weight > 400 g/mole was underpredicted by the RC millimole regression (5/5 [100%] for the 3T3 NRU and 3/3 [100%] for the NHK NRU). For log K<sub>ow</sub> > 3, 9/12 (75%) substances were outliers using the 3T3 data (30% of the outliers) and 8/12 (67%) substances were outliers using the NHK data (26% of the outliers). The toxicity of 7/9 (78%) outliers (with log K<sub>ow</sub> > 3) for the 3T3 NRU assay was underpredicted by the RC millimole regression and the toxicity of 2/9 (22%) outliers was overpredicted. The toxicity of 6/8 (75%) outliers (with log K<sub>ow</sub> > 3) for the NHK NRU assay was underpredicted by the RC millimole regression and the toxicity of 2/8 (25%) outliers was overpredicted. Of the 21 substances with specific mechanisms of toxicity that were not expected to be active in the 3T3 and NHK cell cultures, 13 (62%) were outliers. These substances represented 13/30 (43%) of the discordant substances for the 3T3 NRU and 13/31 (42%) for the NHK NRU.

The lack of fit of individual substances to the regressions was not consistently related to their insolubility in the 3T3 or NHK medium. Of the 25 substances that exhibited precipitates in the 3T3 NRU assay, 11 (44%) substances were discordant (see **Table 5-8** for substances that had precipitates and **Appendix L-1** for the analysis of discordant substances). The toxicity of nine of the 11 (82%) substances was underpredicted by the RC millimole regression and the toxicity of two of the 11 (18%) substances was overpredicted by the RC millimole regression. Of the 24 substances that exhibited precipitates in the NHK NRU assay, 11 (46%) substances were outliers. The toxicity of nine of the 11 (82%) substances was underpredicted by the RC millimole regression and the toxicity of two of the 11 (18%) substances was overpredicted by the RC millimole regression.

Additionally, the lack of fit of individual substances to the RC millimole regression was not consistently related to the fact that the test method systems had little to no metabolic

744 capability. Such a system would be expected to underestimate the toxicity of substances with  
745 active metabolites. However, the toxicity of substances known to produce active metabolites  
746 *in vivo* (listed in **Table 3-7**) was not necessarily underpredicted by the NRU assays. Of the  
747 19 substances known to produce active metabolites *in vivo*, ten were discordant in the 3T3  
748 NRU test method. Of these ten discordant substances, the toxicity of six (60%) was  
749 underpredicted while the toxicity of four (40%) was overpredicted by the 3T3 NRU test  
750 method. These ten discordant substances accounted for 33% of the 30 discordant substances  
751 identified for the 3T3 NRU test method. Nine of the 19 substances known to produce active  
752 metabolites *in vivo* were discordant for the NHK NRU test method. Of these nine discordant  
753 substances, the NHK NRU assay underpredicted the toxicity of five (56%) substances and  
754 overpredicted the toxicity of four (44%) substances. These nine discordant substances  
755 accounted for 29% of the 31 discordant substances identified for the NHK NRU test method.

756  
757 Similarly, Halle (1998) noted that the RC substances that required metabolic activation to  
758 produce *in vivo* toxicity were not necessarily discordant substances (with respect to fit to the  
759 RC millimole regression). Halle (1998) found that eight (50%) of the 16 substances that  
760 required metabolic activation to product toxicity were discordant substances while eight  
761 (50%) were not discordant (see **Table L3-3** in **Appendix L3**).

762  
763 Some substances with low toxicity and low solubility could not be tested in the *in vitro* NRU  
764 cytotoxicity assays because the amount of dissolved substance was inadequate to obtain an  
765 IC<sub>50</sub> value. In the 3T3 NRU test method, none of the laboratories obtained adequate toxicity  
766 in any experiment with carbon tetrachloride and methanol. At least one laboratory failed to  
767 achieve adequate toxicity with gibberellic acid and xylene. In the corresponding NHK assay,  
768 no laboratory achieved adequate toxicity in any experiment with carbon tetrachloride, and at  
769 least one laboratory could not achieve adequate toxicity with methanol, 1,1,1-trichloroethane,  
770 and xylene.

771  
772 Although the accuracy of the 3T3 and NHK NRU test methods for predicting *in vivo* toxicity  
773 category was rather low when used with the RC millimole regression and the RC rat-only  
774 weight regression, it was improved by removing substances with specific mechanisms of

toxicity that were not expected to be active in the 3T3 and NHK cell cultures. The evaluation of these *in vitro* NRU cytotoxicity test methods for predicting starting doses for acute systemic toxicity testing, thereby reducing and refining animal use, is provided in **Section 10**.

## **6.5 Salient Issues of Data Interpretation**

One of the most important considerations for the 3T3 and NHK NRU test methods is getting good dose-response results. In addition to technical difficulties with these methods, such as occasional poor cell growth and the formation of NRU crystals, this validation study yielded observations of unusual dose-responses for certain substances.

The experimenter must be aware of dose-response anomalies and their causes in order to determine whether the dose-response can be better defined. For example, for substances such as aminopterin, which generally produced a biphasic dose-response using the log-dose spacing of the range-finder test, the experimenter must focus on the lowest concentration at which the substance produced 50% toxicity in order to perform the definitive testing with more closely spaced concentrations. In the definitive tests of such substances, the toxic response may plateau before producing 100% toxicity (i.e., 0% viability). The method used for the calculation of the  $IC_{50}$  must reflect an  $IC_{50}$  that is 50% inhibition of the control values rather than the midpoint of the highest and lowest response (as provided by the standard Hill function analysis).

Some substances, because of their low toxicity and/or low solubility, do not provide sufficient toxicity for the calculation of an  $IC_{50}$  value. Carbon tetrachloride, methanol, xylene, gibberellic acid, lithium carbonate and 1,1,1-trichloroethane failed to yield acceptable  $IC_{50}$  results in at least one laboratory due to insufficient toxicity/insolubility. All of these substances, with the exception of methanol, were reported to produce precipitate in the cell culture medium.

## 6.6 Comparison to Established Performance Standards

The *Guidance Document* method of evaluating basal cytotoxicity assays for use in predicting starting doses for acute oral toxicity assays provides the existing performance standard (ICCVAM 2001b) for the 3T3 and NHK NRU cytotoxicity test methods. The *Guidance Document* recommends testing 10 to 20 reference substances from the RC in a candidate *in vitro* basal cytotoxicity assay to be used for predicting starting doses (ICCVAM 2001b). The substances should cover a wide range of toxicity and fit the RC prediction model (i.e., the linear regression line) as closely as possible. The IC<sub>50</sub> results for the selected reference substances are used to calculate a new regression line with the LD<sub>50</sub> values used by the RC. If the resulting regression is parallel to the RC millimole regression and within the  $\pm \log 5$  (i.e.,  $\pm 0.699$ ) prediction interval for the RC, the *Guidance Document* recommends using the cytotoxicity assay to predict starting doses for unknown substances to be tested in acute oral systemic toxicity assays.

One goal of the coded substance testing in Phases Ib and II of this study was to establish whether the results from the 3T3 and NHK NRU cytotoxicity test methods were consistent with the RC millimole regression. As discussed in **Section 3.4.1**, two of the major criteria for selecting the 12 coded substances tested in these phases from the 72 substances to be tested were (a) two substances must be included from each of the unclassified and classified GHS acute oral toxicity categories and (b) the substances must fit as closely to the RC millimole regression as possible. Unfortunately, the SMT could not identify 12 substances that fit both criteria since there was only one substance, aminopterin, in the LD<sub>50</sub> < 5 mg/kg category that fit the RC millimole regression. The other substance chosen for testing for that toxicity category was sodium selenate. Since sodium selenate was not included in the RC, the SMT did not know how closely it would fit the RC millimole regression and it was not included in the regression analyses for Phases Ib and II.

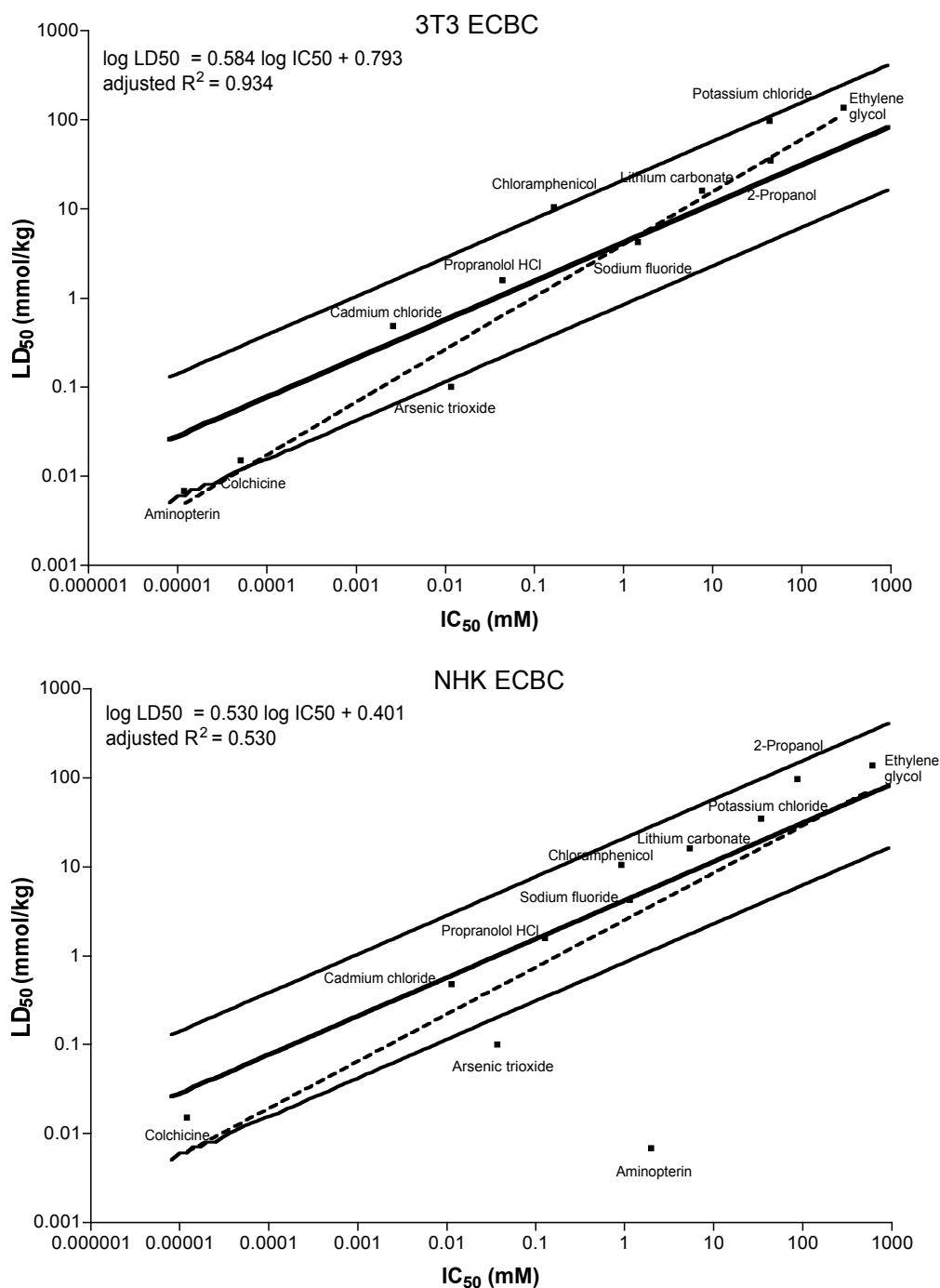
The geometric mean log IC<sub>50</sub> values from the 3T3 and NHK test methods from each laboratory were used with the oral log LD<sub>50</sub> values from the RC (see **Appendices J-1 and J-3**) for the calculation of least squares linear regression analyses (see **Section 5.3**) for the

substances tested in Phases Ib and II. The slopes for all regressions were significantly different from zero with  $p < 0.0001$ . The adjusted  $R^2$  values for the regressions from each laboratory, shown in **Table 6-8**, indicate that the 3T3 NRU test method produced better fitting regressions than the corresponding NHK assay (adjusted  $R^2 = 0.934 - 0.947$  vs.  $0.530 - 0.579$ ). The relatively low adjusted  $R^2$  values for the NHK assay were attributed to the much lower toxicity of aminopterin in that assay (see **Figures 6-6 to 6-8** and **Table 5-4**). The regressions were consistent with the RC millimole regression. **Table 6-8** shows that  $p > 0.01$ , the level of statistical significance, for all joint comparisons of slopes and intercepts with the RC millimole regression. The RC millimole regression slope and intercept were assumed to be constants for the comparison. A graphical comparison of the regressions with the RC millimole regression as suggested by the *Guidance Document* (ICCVAM 2001b) examples demonstrated that the regressions were generally within the RC millimole regression acceptance limits (see **Figures 6-6 to 6-8**). According to the *Guidance Document* (ICCVAM 2001b), basal cytotoxicity assays providing such consistency with the RC millimole regression are acceptable for predicting starting doses for *in vivo* acute oral systemic toxicity assays.

**Table 6-8 Linear Regressions for Substances Tested in Phases Ib and II**

	3T3 Millimole Regression			P-Values for Test Against RC Millimole Regression		
Laboratory	Intercept	Slope	Adjusted $R^2$	Intercept	Slope	Joint <sup>1</sup>
ECBC	0.793	0.584	0.934	0.202	0.014	0.040
FAL	0.709	0.598	0.947	0.497	0.008	0.024
IIVS	0.710	0.584	0.943	0.508	0.014	0.041
	NHK Millimole Regression			P-Values for Test Against RC Millimole Regression		
Laboratory	Intercept	Slope	Adjusted $R^2$	Intercept	Slope	Joint <sup>1</sup>
ECBC	0.401	0.530	0.530	0.484	0.547	0.620
FAL	0.429	0.548	0.579	0.519	0.450	0.569
IIVS	0.373	0.549	0.544	0.426	0.475	0.538

<sup>1</sup>Simultaneous comparison of slope and intercept. The RC slope and intercept were assumed to be constants. ECBC – US Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for *In Vitro* Sciences

858 **Figure 6-6** *In Vitro – In Vivo Regressions<sup>1</sup> for Phases Ib and II for ECBC*

859

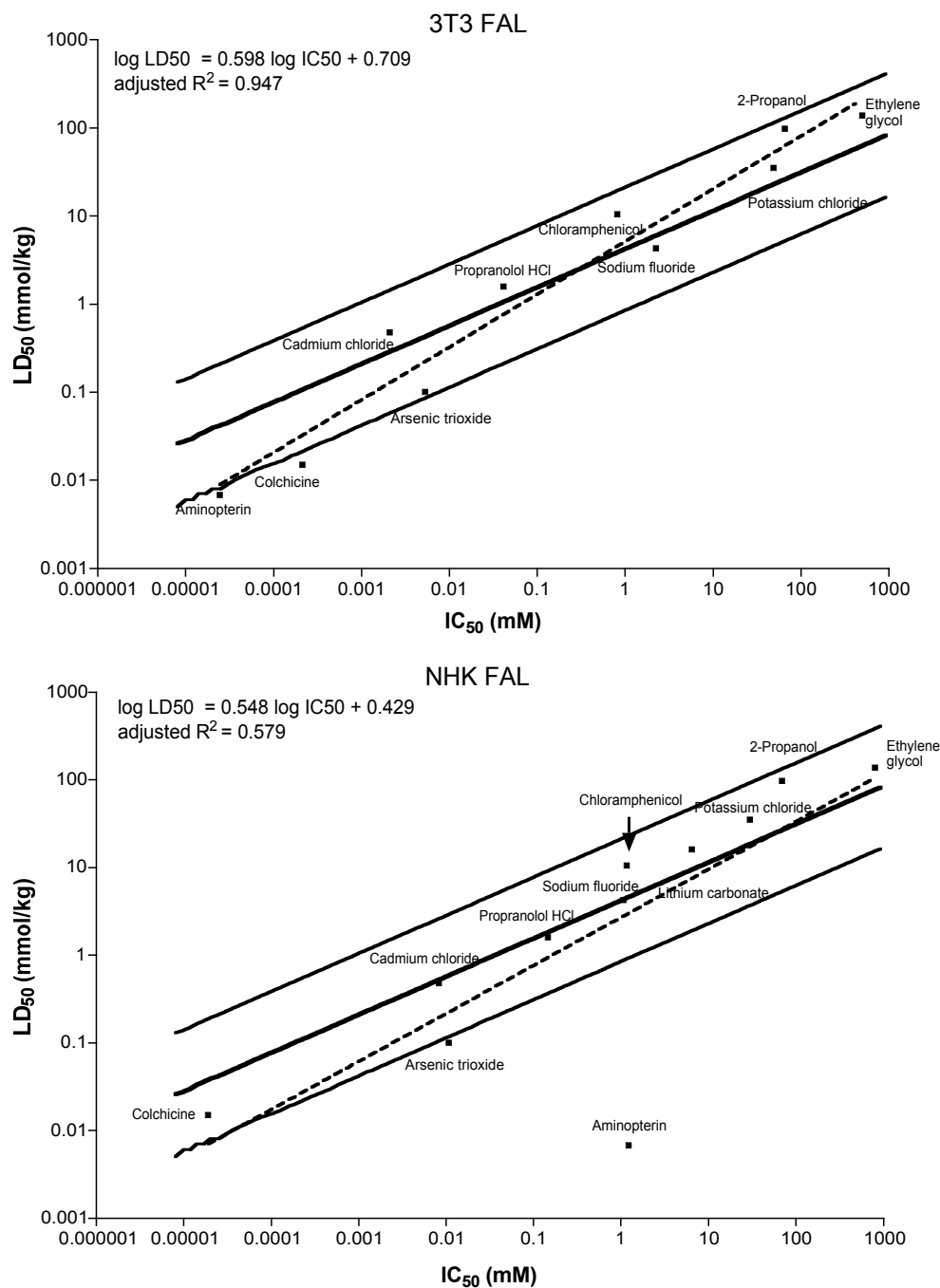
860 ——— Solid Lines: RC millimole regression and acceptance limits - - - - - Dashed Line: Study Regression

861 <sup>1</sup>Regressions of substances tested in Phases Ib and II do not include sodium selenate since it was not included in

862 the RC.

863 ECBC: U.S. Army Edgewood Chemical Biological Command

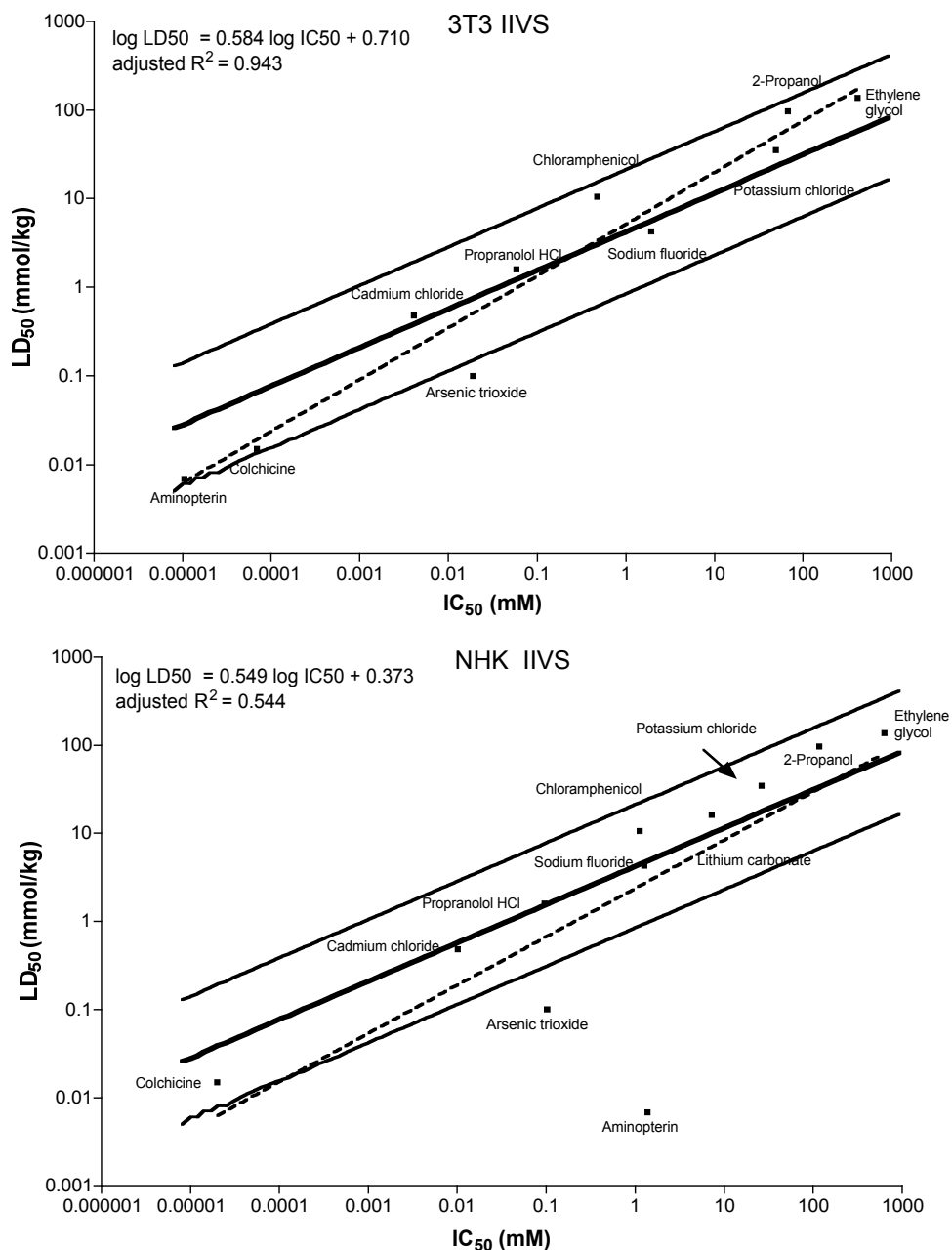
864

865 **Figure 6-7** *In Vitro – In Vivo Regressions<sup>1</sup> for Phases Ib and II for FAL*

— Solid Lines: RC millimole regression and acceptance limits - - - - Dashed Line: Study Regression

<sup>1</sup>Regressions of substances tested in Phases Ib and II do not include sodium selenate since it was not included in the RC.

FAL: Fund for the Replacement of Animals in Medical Experiments Alternatives Laboratory

872 **Figure 6-8** *In Vitro – In Vivo Regressions<sup>1</sup> for Phases Ib and II for IIVS*

873  
874 — Solid Lines: RC millimole regression and acceptance limits - - - Dashed Line: Study Regression  
875 <sup>1</sup>Regressions of substances tested in Phases Ib and II do not include sodium selenate since it was not included in  
876 the RC.  
877 IIVS: Institute for In Vitro Sciences



## 6.7 Summary

The millimole regressions developed using the NICEATM/ECVAM IC<sub>50</sub> and LD<sub>50</sub> data were not significantly different from a regression for the 58 RC substances calculated using the RC data (F test;  $p = 0.929$  for the 3T3 NRU regression and  $p = 0.144$  for the NHK NRU regression). To improve the RC millimole regression with respect to the prediction of LD<sub>50</sub> values by *in vitro* NRU IC<sub>50</sub> values, regressions were developed using the RC data in weight units to exclude (1) mouse data (i.e., the RC rat-only weight regression) and (2) substances with mechanisms of toxicity that were not expected to be active in the 3T3 and NHK cell cultures (i.e., the RC rat-only regression excluding substances with specific mechanisms of toxicity regression).

Accuracy in predicting GHS acute toxicity category using these *in vitro* NRU cytotoxicity test methods was 26% (12/46) for the 3T3 NRU and 28% (13/47) for the NHK NRU with the RC millimole regression. Accuracy with the RC rat-only weight regression improved to 35% (16/46) for the 3T3 NRU and 30% (14/47) for the NHK NRU. Accuracy was higher for substances with  $50 < LD_{50} \leq 2000$  mg/kg compared to substances with higher or lower toxicity. For these two regressions, the accuracy of predicting the  $50 < LD_{50} \leq 300$  mg/kg and  $300 < LD_{50} \leq 2000$  mg/kg categories for the 3T3 and NHK NRU was 67-100% and 50-100%, respectively. The accuracy of predicting the  $LD_{50} \leq 5$  mg/kg and  $5 < LD_{50} \leq 50$  mg/kg categories was 0-17% for the 3T3 NRU and 0-50% for the NHK NRU. The accuracy for substances with  $2000 < LD_{50} \leq 5000$  mg/kg and  $LD_{50} > 5000$  mg/kg was 0-67% and 0-44% for the 3T3 and NHK NRU data, respectively.

Examination of outliers for the RC millimole regression by chemical class showed that 3 of 3 (100%) organophosphates were outliers in both test methods. Other characteristics that seemed promising for characterizing RC outliers were boiling point, molecular weight, and log K<sub>ow</sub>. For boiling points  $> 200^{\circ}\text{C}$ , 9/13 (69%) substances were outliers for both the 3T3 and NHK NRU results. For molecular weight  $> 400$  g/mole, 5/7 (71%) substances were

910 outliers using the 3T3 data and 3/7 (43%) were outliers using the NHK data. For  $\log K_{ow} >$   
911 3, 9/12 (75%) substances were outliers using the 3T3 data and 8/12 (67%) substances were  
912 outliers using the NHK data.

913  
914 The lack of fit of individual substances to the RC millimole regression was not consistently  
915 related to substance insolubility in the 3T3 or NHK medium or to the fact that the test  
916 method systems had little to no metabolic capability. Of the substances that exhibited  
917 precipitates, 11/25 (44%) substances were discordant with the 3T3 NRU assay and 11/24  
918 (46%) were discordant with the NHK NRU assay. Also, although the 3T3 and NHK cells  
919 have little to no metabolic capability, the toxicity of substances known to produce active  
920 metabolites *in vivo* was not necessarily underpredicted by these assays. Of the 19 substances  
921 known to produce active metabolites *in vivo*, ten (53%) were discordant in the 3T3 NRU test  
922 method. Of these ten discordant substances, the toxicity of six (60%) was underpredicted  
923 while the toxicity of four (40%) was overpredicted by the 3T3 NRU test method. These ten  
924 discordant substances accounted for 33% of the 30 discordant substances identified for the  
925 3T3 NRU test method. Similarly, nine (47%) of the 19 substances known to produce active  
926 metabolites *in vivo* were discordant for the NHK NRU test method. Of these nine discordant  
927 substances, the NHK NRU assay underpredicted the toxicity of five (56%) substances and  
928 overpredicted the toxicity of four (44%) substances. These nine discordant substances  
929 accounted for 29% of the 31 discordant substances identified for the NHK NRU test method.

930  
931 The examination of outliers based on mechanism of toxicity lead to the development the RC  
932 rat-only weight regression excluding substances with specific mechanisms of toxicity. Of the  
933 21 substances with specific mechanisms of toxicity that were not expected to be active in the  
934 3T3 and NHK cell cultures, 13 (62%) were outliers. These substances represented 13/30  
935 (43%) of the discordant substances for the 3T3 NRU test method and 13/31 (42%) for the  
936 NHK NRU test method. The RC rat-only weight regression excluding substances with  
937 specific mechanisms of toxicity improved the accuracy from 26% (12/46) for the RC  
938 millimole regression to 46% (21/46) for the 3T3 NRU test method and from 28% (13/47) to  
939 38% (18/47) for the NHK NRU test method.

The RC rat-only weight regression calculated after removal of substances with specific mechanisms of toxicity improved the accuracy (compared with the RC millimole regression) for predicting most toxicity categories. It did not improve the accuracy of category prediction for substances with  $LD_{50} < 50$  mg/kg or for substances with  $300 < LD_{50} \leq 2000$  mg/kg. The following changes in accuracy for the various toxicity categories, compared with the RC millimole regression, occurred:

- $LD_{50} \leq 5$  mg/kg – 0% to 0% for both 3T3 and NHK NRU
- $5 < LD_{50} \leq 50$  mg/kg – 17% to 14% for the 3T3 NRU and 50% to 14% for the NHK NRU
- $300 < LD_{50} \leq 2000$  mg/kg – 100% to 78% for the 3T3 NRU and 100% to 89% for the NHK NRU
- $2000 < LD_{50} \leq 5000$  mg/kg – 0% to 67% for the 3T3 NRU and 9% to 44% for the NHK NRU
- $LD_{50} > 5000$  mg/kg – 10% to 25% for the 3T3 NRU and 0% to 15% for the NHK NRU

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## 7.0 RELIABILITY OF THE 3T3 AND NHK NRU TEST METHODS

This section discusses the reliability of the 3T3 and NHK NRU test methods. Reliability is the degree to which a test method can be performed reproducibly within and among laboratories over time (ICCVAM 2003). It is assessed by calculating intra- and inter-laboratory reproducibility and repeatability. Reproducibility is the consistency of individual test results obtained in a single laboratory (intralaboratory reproducibility) or in different laboratories (interlaboratory reproducibility) using the same protocol and test samples. Repeatability, usually applied to results within a laboratory, is the closeness of agreement between test results obtained within a single laboratory when the procedure is performed on the same substance under identical conditions within a given time. The NICEATM/ECVAM study was not designed to assess intralaboratory repeatability.

For the NICEATM/ECVAM validation study, reliability was assessed by determining both intra- and inter-laboratory reproducibility. Intralaboratory reproducibility is the agreement of results produced when qualified people within the same laboratory perform the test method using the same test protocol at different times (ICCVAM 2003). Interlaboratory reproducibility is the agreement of results from different qualified laboratories using the same protocol and reference substances. Interlaboratory reproducibility indicates the extent to which a test method can be successfully transferred among laboratories.

Intra- and inter-laboratory reproducibility of the 3T3 and NHK NRU test methods were determined using ANOVA and CV analysis as discussed in **Section 5.3.3** (see **Sections 7.2.1** and **7.2.2**). Interlaboratory reproducibility of the 3T3 and NHK NRU test methods was also assessed by comparing the laboratory-specific  $IC_{50}$ - $LD_{50}$  regressions (from **Table 6-1**) to one another for each test method (see **Section 7.2.3**) and by evaluating laboratory concordance for the GHS acute oral toxicity category predictions reported in **Sections 6.3.1** through **6.3.3** (see **Section 7.2.4**). Laboratory concordance for the solvent selection process using the solubility protocol (described in **Section 2.9**) is provided in **Section 7.4**.

## 7.1 Substances Used to Determine the Reliability of the 3T3 and NHK NRU Test Methods

The SMT intended to use the  $IC_{50}$  results of all 72 reference substances identified for testing in **Table 3-2** to determine the reliability of the 3T3 and NHK NRU test methods. Unfortunately,  $IC_{50}$  results for all substances could not be obtained in all the laboratories. **Table 7-1** shows the substances that failed to yield sufficient cytotoxicity for the calculation of an  $IC_{50}$  and the number of substances left to determine intralaboratory reproducibility. The laboratories failed to obtain  $IC_{50}$  results for three to five substances in the 3T3 NRU test method and two to three substances with the NHK NRU test method.

For the 3T3 NRU test method, no laboratory achieved sufficient cytotoxicity to obtain  $IC_{50}$  values for carbon tetrachloride or methanol and only one laboratory obtained  $IC_{50}$  results for lithium carbonate and xylene. Thus, interlaboratory reproducibility for the 3T3 NRU test method was assessed using the remaining 68 reference substances. For the NHK NRU test method, no laboratory obtained  $IC_{50}$  values for carbon tetrachloride and only one laboratory achieved  $IC_{50}$  results for xylene and 1,1,1-trichloroethane. Interlaboratory reproducibility for the NHK NRU test method was assessed using the  $IC_{50}$  results for the remaining 69 reference substances.

Despite the fact that  $IC_{50}$  values were not obtained by all the laboratories for all reference substances, **Table 7-2** shows that the complete range of  $LD_{50}$  responses, as defined by the GHS classification for acute oral toxicity in **Table 3-1**, was covered by the remaining substances. The  $IC_{50}$  values also covered a wide range of responses (see **Table 7-3**).  $IC_{50}$  values for the 3T3 NRU test method ranged from 0.005 to 38,878  $\mu\text{g/mL}$ .  $IC_{50}$  values for the NHK NRU test method covered a larger range, from 0.00005 to 49,800  $\mu\text{g/mL}$ .



**Table 7-1 Reference Substances That Failed to Yield IC<sub>50</sub> Values<sup>1</sup> And Number of Reference Substances Available for Intralaboratory Reproducibility Analyses**

Laboratory	3T3 NRU Test Method		NHK NRU Test Method	
	Reference Substances Lacking IC <sub>50</sub> Results	N <sup>2</sup>	Reference Substances Lacking IC <sub>50</sub> Results	N <sup>2</sup>
ECBC	Carbon tetrachloride Methanol Xylene	69	Carbon tetrachloride Methanol Xylene	69
FAL	Carbon tetrachloride Gibberellic acid Lithium carbonate Methanol Xylene	67	1,1,1-Trichloroethane Carbon tetrachloride Xylene	69
IIVS	Carbon tetrachloride Lithium carbonate Methanol	69	1,1,1-Trichloroethane Carbon tetrachloride	70

<sup>1</sup>Due to insufficient cytotoxicity.

<sup>2</sup>Number of substances available for intralaboratory reproducibility analyses.

**Table 7-2 Number of Reference Substances Tested vs Number of Reference Substances Yielding IC<sub>50</sub> Values in Each GHS Toxicity Category<sup>1</sup> for Two Sets of LD<sub>50</sub> Values**

GHS Category <sup>1</sup> (LD <sub>50</sub> in mg/kg)	Initial Oral LD <sub>50</sub> <sup>2</sup>	Reference Oral LD <sub>50</sub> <sup>3</sup>	Results from 3T3 NRU Test Method		Results from NHK NRU Test Method	
			Initial Oral LD <sub>50</sub> <sup>2</sup>	Reference Oral LD <sub>50</sub> <sup>3</sup>	Initial Oral LD <sub>50</sub> <sup>2</sup>	Reference Oral LD <sub>50</sub> <sup>3</sup>
LD <sub>50</sub> ≤ 5	12	7	12	7	12	7
5 < LD <sub>50</sub> ≤ 50	12	12	12	12	12	12
50 < LD <sub>50</sub> ≤ 300	12	12	12	12	12	12
300 < LD <sub>50</sub> ≤ 2000	12	16	11	15	12	16
2000 < LD <sub>50</sub> ≤ 5000	12	12	10	10	10	10
LD <sub>50</sub> > 5000	12	13	11	12	11	12

<sup>1</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals (UN 2005).

<sup>2</sup>Number of reference substances that yielded an IC<sub>50</sub> value in at least one laboratory based on initial oral LD<sub>50</sub> in **Table 3-2**. Initial oral LD<sub>50</sub> values, used during the reference substance selection process, were those used by the Registry of Cytotoxicity (RC) (from 1983/84 RTECS<sup>®</sup>) when applicable. The RC is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for chemicals with known molecular weights (Halle 1998). Values for reference substances not included in the RC came from HSDB or RTECS<sup>®</sup>.

<sup>3</sup>Number of reference substances that yielded an IC<sub>50</sub> value in at least one laboratory based on reference oral LD<sub>50</sub> in **Table 4-2**. Reference oral LD<sub>50</sub> values from rats and mice were derived after evaluating LD<sub>50</sub> values located through literature searches and references from toxicity databases such as RTECS<sup>®</sup>.

## 7.2 Reproducibility Analyses for the 3T3 and NHK NRU Test Methods

Reproducibility of the 3T3 and NHK NRU test methods were performed using ANOVA and CV as described in **Section 5.3.3**. **Table 7-3** reports the results of these analyses for each reference substance and test method.

### 7.2.1 ANOVA Results for the 3T3 and NHK NRU Test Methods

ANOVA was performed as discussed in **Section 5.3.3**. Since the sample sizes from this study were small, usually three observations per laboratory, the ANOVA results may be misleading. There may be some differences that are statistically significant only because there are too few observations within the laboratories to adequately characterize the variability, and/or the within-laboratory variability estimate is small.

#### *Differences Among the Laboratories for the 3T3 NRU Test Method*

The ANOVA results in **Table 7-3** indicate that there were statistically significant ( $p < 0.01$ ) differences among the laboratories for 26 reference substances. These chemicals are listed in **Table 7-4** along with columns showing the laboratory statistically significantly differing from the other two laboratories (as indicated by the contrast results). Since significant laboratory differences may be produced by insolubility or volatility, **Table 7-4** also indicates whether any laboratory reported insolubility or volatility during conduct of the test. Insolubility was suggested by the presence of precipitates in either the stock solutions or in cell culture. Volatility was identified by the use of plate sealers to contain volatile contamination of lower concentration wells by higher concentrations. Insolubility and volatility were reported for only nine of the 26 chemicals.

**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
Acetaminophen	50.1		28	1.70	0.171		526		13	2.72	0.181	
ECBC	40.8	22		1.61		NA	558	15		2.75		NA
FAL	66.2	35		1.82		NA	447	19		2.65		NA
IIVS	43.4	26		1.64		NA	571	14		2.76		NA
Acetonitrile	8484		21	3.93	0.553		10104		8	4.00	0.9641	
ECBC	6433	2		3.81		NA	10868	72		4.04		NA
FAL	9690	58		3.99		NA	10153	19		4.01		NA
IIVS	9330	13		3.97		NA	9290	4		3.97		NA
Acetylsalicylic acid	760		56	2.88	<0.001		613		15	2.79	0.060	
ECBC	646	10		2.81		0.581	631	3		2.80		NA
FAL	1234	24		3.09		<0.001	694	14		2.84		NA
IIVS	401	16		2.60		<0.001	514	15		2.71		NA
5-Aminosalicylic acid	1698		19	3.23	0.054		52.3		47	1.72	0.044	
ECBC	1467	14		3.17		0.092	29.9	22		1.48		0.025
FAL	2070	16		3.32		0.021	78.2	54		1.89		0.033
IIVS	1557	12		3.19		0.312	48.8	16		1.69		0.832
Aminopterin	0.007		54	-2.14	0.036		682		27	2.83	0.0250	
ECBC	0.005	20		-2.28		0.216	889	20		2.95		0.017
FAL	0.012	46		-1.93		0.013	545	8		2.74		0.041
IIVS	0.005	23		-2.33		0.079	611	12		2.79		0.345
Amitriptyline HCl	7.23		14	0.86	0.348		9.76		19	0.99	0.365	
ECBC	6.03	23		0.78		0.163	10.8	31		1.03		NA
FAL	7.86	28		0.90		0.469	7.57	72		0.88		NA
IIVS	7.81	18		0.89		0.445	10.9	10		1.04		NA
Arsenic trioxide	2.51		61	0.40	0.004		10.4		91	1.02	<0.001	
ECBC	2.41	33		0.38		0.527	7.77	33		0.89		0.694
FAL	1.04	7		0.02		0.002	2.55	75		0.41		<0.001
IIVS	4.09	52		0.61		0.006	20.9	31		1.32		0.0006
Atropine sulfate	85.6		49	1.93	0.049		91.9		13	1.96	0.9881	
ECBC	54.1	55		1.73		0.046	85.4	12		1.93		0.8903
FAL	133	31		2.12		0.024	104	85		2.02		0.9069
IIVS	70.0	8		1.85		0.641	83.2	25		1.92		0.9832
Boric acid	2228		69	3.35	0.010		473		8	2.67	0.9306	
ECBC	1497	32		3.18		0.189	440	31		2.64		0.9692
FAL	3987	17		3.60		0.004	517	73		2.71		0.7391
IIVS	1202	48		3.08		0.021	464	2		2.67		0.7680
Busulfan	135		119	2.13	0.002		278		11	2.44	0.659	
ECBC	40.0	48		1.60		0.012	253	27		2.40		NA
FAL	321	56		2.51		< 0.001	268	72		2.43		NA
IIVS	43.7	4		1.64		0.033	313	12		2.50		NA
Cadmium chloride	0.565		39	-0.25	0.124		1.98		10	0.30	0.733	
ECBC	0.480	14		-0.32		NA	2.20	37		0.34		NA

**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
FAL	0.400	32		-0.40		NA	1.88	65		0.27		NA
IIVS	0.817	53		-0.09		NA	1.86	8		0.27		NA
Caffeine	161		18	2.21	0.481		661		21	2.82	0.296	
ECBC	133	10		2.12		NA	817	31		2.91		NA
FAL	157	52		2.20		NA	591	32		2.77		NA
IIVS	191	7.5		2.28		NA	574	1		2.76		NA
Carbamazepine	109		35	2.04	0.049		128		85	2.11	0.432	
ECBC	83.0	14		1.92		NA	66.1	13		1.82		NA
FAL	152	37		2.18		NA	253	129		2.40		NA
IIVS	91.8	12		1.96		NA	63.9	8		1.81		NA
Carbon tetrachloride	NA		NA	NA	NA		NA		NA	NA	NA	
ECBC	NA	NA		NA		NA	NA	NA		NA		NA
FAL	NA	NA		NA		NA	NA	NA		NA		NA
IIVS	NA	NA		NA		NA	NA	NA		NA		NA
Chloral hydrate	187		25	2.27	0.004		137		17	2.14	0.302	
ECBC	151	10		2.18		0.008	140	24		2.15		NA
FAL	241	10		2.38		0.002	159	32		2.20		NA
IIVS	170	12		2.23		0.181	112	2		2.05		NA
Chloramphenicol	161		67	2.21	<0.001		366		13	2.56	0.750	
ECBC	55.3	22		1.74		<0.001	318	45		2.50		NA
FAL	273	30		2.44		0.001	414	44		2.62		NA
IIVS	156	18		2.19		0.165	367	22		2.56		NA
Citric acid	829		41	2.92	0.002		424		25	2.63	0.006	
ECBC	473	29		2.68		0.001	526	16		2.72		0.009
FAL	1148	13		3.06		0.003	312	17		2.49		0.002
IIVS	865	19		2.94		0.298	433	5		2.64		0.483
Colchicine	0.047		85	-1.33	0.001		0.007		22	-2.16	0.174	
ECBC	0.020	11		-1.70		0.0028	0.005	46		-2.28		NA
FAL	0.093	45		-1.03		0.0005	0.008	10		-2.12		NA
IIVS	0.028	1		-1.55		0.0914	0.008	21		-2.09		NA
Cupric sulfate pentahydrate	70.6		85	1.85	<0.001		197		4	2.29	0.374	
ECBC	82.7	4		1.92		0.001	190	10		2.28		NA
FAL	123	44		2.09		<0.001	195	6		2.29		NA
IIVS	5.70	31		0.76		<0.001	207	3		2.32		NA
Cycloheximide	0.293		104	-0.53	0.021		0.082		43	-1.09	0.302	
ECBC	0.125	45		-0.90		0.118	0.053	22		-1.28		NA
FAL	0.647	70		-0.19		0.007	0.120	78		-0.92		NA
IIVS	0.109	23		-0.96		0.076	0.071	19		-1.15		NA
Dibutyl phthalate	78.3		124	1.89	< 0.001		32.6		41	1.51	0.408	
ECBC	23.5	17		1.37		0.012	28.3	27		1.45		NA

**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
FAL	191	50		2.28		<0.001	47.4	73		1.68		NA
IIVS	20.7	7		1.32		0.005	22.0	6		1.34		NA
Dichlorvos	20.3		57	1.31	0.002		11.1		20	1.05	0.181	
ECBC	9.80	35		0.99		0.001	8.56	27		0.93		NA
FAL	32.8	6		1.52		0.002	12.4	30		1.09		NA
IIVS	18.3	11		1.26		0.823	12.2	3		1.09		NA
Diethyl phthalate	113		28	2.05	0.127		145		44	2.16	0.049	
ECBC	85.5	34		1.93		0.092	174	8		2.24		0.196
FAL	147	26		2.17		0.070	71.5	94		1.85		0.018
IIVS	106	24		2.03		0.846	189	18		2.28		0.127
Digoxin	520		62	2.72	0.043		0.00314		88	-2.50	<0.001	
ECBC	351	39		2.54		0.167	0.00538	13		-2.27		<0.001
FAL	892	36		2.95		0.017	0.00005	36		-4.29		<0.001
IIVS	317	21		2.50		0.144	0.00398	7		-2.40		<0.001
Dimethylformamide	5242		6	3.72	0.296		7856		19	3.90	<0.001	
ECBC	5343	10		3.73		NA	9353	2		3.97		<0.001
FAL	5483	9		3.74		NA	7817	1		3.89		0.508
IIVS	4900	4		3.69		NA	6397	3		3.81		<0.001
Diquat dibromide monohydrate	15.1		120	1.18	0.017		4.73		37	0.67	0.217	
ECBC	3.90	23		0.59		0.040	3.59	23		0.56		NA
FAL	36.1	98		1.56		0.006	6.77	55		0.83		NA
IIVS	5.40	25		0.73		0.190	3.84	8		0.58		NA
Disulfoton	98.6		55	1.99	0.003		378		99	2.58	<0.001	
ECBC	137	55		2.14		NA	140	19		2.15		0.002
FAL	NA	NA		NA		NA	808	26		2.91		<0.001
IIVS	60.4	87		1.78		NA	186	32		2.27		0.018
Endosulfan	8.02		78	0.90	0.046		2.35		43	0.37	0.029	
ECBC	5.30	57		0.72		0.447	3.44	17		0.54		0.020
FAL	15.2	78		1.18		0.018	1.42	50		0.15		0.018
IIVS	3.60	42		0.56		0.080	2.19	20		0.34		0.927
Epinephrine bitartrate	59.4		12	1.77	0.048		90.6		24	1.96	0.119	
ECBC	51.5	12		1.71		0.018	115	9		2.06		NA
FAL	63.4	11		1.80		0.165	81.7	35		1.91		NA
IIVS	63.4	3		1.80		0.149	75.0	16		1.88		NA
Ethanol	6731		23	3.83	0.075		10184		18	4.01	0.035	
ECBC	5360	33		3.73		NA	8290	5		3.92		0.019
FAL	8420	14		3.93		NA	12013	19		4.08		0.029
IIVS	6413	5		3.81		NA	10250	9		4.01		0.752
Ethylene glycol	25292		26	4.40	0.007		42600		15	4.63	0.063	
ECBC	18325	9		4.26		0.004	38000	12		4.58		NA
FAL	31650	24		4.50		0.010	49800	9		4.70		NA

**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
IIVS	25900	12		4.41		0.505	40000	13		4.60		NA
Fenpropathrin	27.2		49	1.43	0.301		2.60		39	0.41	0.031	
ECBC	22.6	11		1.35		NA	3.73	27		0.57		0.013
FAL	42.4	63		1.63		NA	2.23	28		0.35		0.375
IIVS	16.7	12		1.22		NA	1.82	17		0.26		0.044
Gibberellic Acid	7842		3	3.89	0.621		2866		2	3.46	0.862	
ECBC	8027	11		3.90		NA	2850	14		3.45		NA
FAL	NA	NA		NA		NA	2940	9		3.47		NA
IIVS	7657	10		3.88		NA	2807	4		3.45		NA
Glutethimide	192		43	2.28	< 0.001		177		5	2.25	0.968	
ECBC	167	4		2.22		0.029	187	34		2.27		NA
FAL	284.3	7		2.45		<0.001	170	14		2.23		NA
IIVS	125.3	7		2.10		<0.001	176	16		2.24		NA
Glycerol	28904		33	4.46	0.846		27108		31	4.43	0.200	
ECBC	20000	15		4.30		NA	34267	45		4.53		NA
FAL	38878	73		4.59		NA	18023	46		4.26		NA
IIVS	27833	39		4.44		NA	29033	16		4.46		NA
Haloperidol	6.26		24	0.80	0.006		3.57		7	0.55	0.935	
ECBC	5.30	12		0.72		0.030	3.69	27		0.57		NA
FAL	8.00	8		0.90		0.002	3.72	49		0.57		NA
IIVS	5.50	12		0.74		0.061	3.29	35		0.52		NA
Hexachlorophene	4.48		27	0.65	0.174		0.031		41	-1.50	0.097	
ECBC	5.00	48		0.70		NA	0.027	16		-1.57		NA
FAL	5.30	33		0.72		NA	0.046	44		-1.34		NA
IIVS	3.10	9		0.49		NA	0.021	11		-1.67		NA
Lactic acid	3073		12	3.49	0.160		1308		1	3.12	0.904	
ECBC	2943	11		3.47		NA	1290	4		3.11		NA
FAL	3487	16		3.54		NA	1320	5		3.12		NA
IIVS	2790	9		3.45		NA	1313	11		3.12		NA
Lindane	161		58	2.21	0.066		19.3		20	1.29	0.203	
ECBC	125	95		2.10		NA	19.1	17		1.28		NA
FAL	266	36		2.43		NA	23.2	31		1.37		NA
IIVS	90.4	122		1.96		NA	15.6	15		1.19		NA
Lithium carbonate	NA		NA	NA	NA	NA	477		13	2.68	0.295	
ECBC	564	12		2.75		NA	411	29		2.61		NA
FAL	NA	NA		NA		NA	486	20		2.69		NA
IIVS	NA	NA		NA		NA	535	6		2.73		NA
Meprobamate	539		54	2.73	<0.001		516		61	2.71	0.027	
ECBC	353	14		2.55		0.001	761	15		2.88		0.0758
FAL	877	15		2.94		<0.001	163	116		2.21		0.0098
IIVS	386	2		2.59		0.005	624	14		2.80		0.1648

**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
Mercury chloride	4.32		33	0.64	0.021		5.87		15	0.77	0.120	
ECBC	3.50	5		0.54		0.083	6.87	15		0.84		NA
FAL	6.00	31		0.78		0.008	5.40	19		0.73		NA
IIVS	3.50	3		0.54		0.110	5.35	2		0.73		NA
Methanol	NA		NA	NA	NA	NA	1616		42	3.21	0.007	
ECBC	NA	NA		NA		NA	NA	NA		NA		NA
FAL	NA			NA		NA	1133	19		3.05		NA
IIVS	NA			NA		NA	2100	11		3.32		NA
Nicotine	378		25	2.58	0.128		113		17	2.05	0.700	
ECBC	272	24		2.43		NA	94.3	26		1.97		NA
FAL	412	33		2.61		NA	134	59		2.13		NA
IIVS	450	12		2.65		NA	112	25		2.05		NA
Paraquat	23.3		8	1.37	1.000		66.1		40	1.82	0.047	
ECBC	21.3	34		1.33		NA	48.3	13		1.68		0.089
FAL	24.9	67		1.40		NA	96.6	39		1.98		0.018
IIVS	23.7	64		1.37		NA	53.4	10		1.73		0.279
Parathion	61.8		111	1.79	0.014		31.4		8	1.50	0.845	
ECBC	22.7	53		1.36		0.064	34.0	30		1.53		NA
FAL	141	70		2.15		0.005	31.2	38		1.49		NA
IIVS	22	22		1.34		0.081	29.0	29		1.46		NA
Phenobarbital	612		21	2.79	0.232		478		39	2.68	0.027	
ECBC	634	21		2.80		NA	693	26		2.84		0.010
FAL	726	35		2.86		NA	360	27		2.56		0.072
IIVS	476	23		2.68		NA	381	18		2.58		0.173
Phenol	70.9		41		0.011		77.7		22	1.89	0.094	
ECBC	50.2	22		1.70		0.022	59.1	36		1.77		NA
FAL	104	24		2.02		0.004	93.2	6		1.97		NA
IIVS	58.1	12		1.76		0.206	80.8	6		1.91		NA
Phenylthiourea	119		90	2.08	0.007		346		19	2.54	0.133	
ECBC	30.1	66		1.48		0.004	363	16		2.56		NA
FAL	239	28		2.38		0.006	401	21		2.60		NA
IIVS	89	25		1.95		0.718	272	26		2.44		NA
Physostigmine	28.8		30	1.46	0.149		172		22	2.24	0.623	
ECBC	28.2	53		1.45		NA	164	3		2.21		NA
FAL	37.8	5		1.58		NA	213	112		2.33		NA
IIVS	20.4	33		1.31		NA	139	6		2.14		NA
Potassium chloride	3635		7	3.56	0.846		2279		13	3.36	0.396	
ECBC	3352	14		3.53		NA	2560	17		3.41		NA
FAL	3842	31		3.58		NA	2287	28		3.36		NA
IIVS	3710	11		3.57		NA	1990	8		3.30		NA
Potassium cyanide	64.3		127	1.81	<0.001		45.1		86	1.65	0.340	
ECBC	15.3	25		1.18		0.001	29.3	24		1.47		NA

**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
FAL	159	52		2.20		<0.001	89.0	112		1.95		NA
IIVS	18.9	5		1.28		0.006	16.9	13		1.23		NA
Procainamide HCl	443		11	2.65	0.007		1764		16	3.25	0.053	
ECBC	400	4		2.60		0.008	1480	14		3.17		NA
FAL	431	1		2.63		0.396	1787	12		3.25		NA
IIVS	497	8		2.70		0.003	2027	11		3.31		NA
2-Propanol	3563		23	3.55	0.001		5541		26	3.74	0.033	
ECBC	2610	9		3.42		< 0.001	5263	11		3.72		0.797
FAL	3970	4		3.60		0.004	4273	27		3.63		0.026
IIVS	4110	4		3.61		0.002	7087	7		3.85		0.018
Propranolol HCl	14.9		16	1.17	0.488		36.9		21	1.57	0.003	
ECBC	13.6	32		1.13		NA	38.27	12		1.58		0.325
FAL	13.5	51		1.13		NA	43.8	6		1.64		0.006
IIVS	17.6	21		1.25		NA	28.6	11		1.46		0.001
Propylparaben	29.9		64	1.48	0.001		16.8		16	1.23	0.066	
ECBC	20.9	16		1.32		0.045	18.1	13		1.26		NA
FAL	51.8	29		1.71		< 0.001	18.6	15		1.27		NA
IIVS	17.1	12		1.23		0.003	13.8	9		1.14		NA
Sodium arsenite	0.873		55	-0.06	0.028		0.532		44	-0.27	0.061	
ECBC	0.500	6		-0.30		0.032	0.790	32		-0.10		NA
FAL	1.40	57		0.15		0.012	0.336	56		-0.47		NA
IIVS	0.700	17		-0.15		0.478	0.470	14		-0.33		NA
Sodium chloride	4764		3	3.68	0.759		2724		51	3.44	0.045	
ECBC	4790	5		3.68		NA	3583	7		3.55		0.141
FAL	4625	13		3.67		NA	1118	124		3.05		0.017
IIVS	4877	9		3.69		NA	3470	9		3.54		0.161
Sodium dichromate dihydrate	0.602		9	-0.22	0.822		0.737		19	-0.13	0.258	
ECBC	0.603	14		-0.22		NA	0.784	14		-0.11		NA
FAL	0.657	37		-0.18		NA	0.851	36		-0.07		NA
IIVS	0.547	17		-0.26		NA	0.576	17		-0.24		NA
Sodium fluoride	79.8		22	1.90	0.016		47.4		15	1.68	0.313	
ECBC	61.3	9		1.79		0.007	48.7	14		1.69		NA
FAL	96.1	18		1.98		0.019	39.7	24		1.60		NA
IIVS	82.0	7		1.91		0.463	53.7	13		1.73		NA
Sodium hypochlorite	1211		57	3.08	0.040		1580		20	3.20	0.313	
ECBC	823	13		2.92		0.257	1863	31		3.27		NA
FAL	805	46		2.91		0.119	1243	46		3.09		NA
IIVS	2005	44		3.30		0.015	1633	11		3.21		NA
Sodium oxalate	40.8		23	1.61	0.643		355		1	2.55	0.926	
ECBC	42.0	41		1.62		NA	355	15		2.55		NA



**Table 7-3 Reproducibility Results for the 3T3 and NHK NRU Test Methods**

Reference Substance/Laboratory	3T3 NRU Test Method						NHK NRU Test Method					
	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>	Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	Arithmetic IntraLab %CV	Arithmetic InterLab %CV	Log Arithmetic Mean IC <sub>50</sub> (µg/mL) <sup>1</sup>	ANOVA P <sup>2</sup>	Contrast P <sup>3</sup>
FAL	31.0	28		1.49		NA	350	42		2.54		NA
IIVS	49.5	53		1.69		NA	360	26		2.56		NA
Sodium selenate	34.5		60	1.54	<0.001		11.2		40	1.05	0.134	
ECBC	12.7	13		1.10		<0.001	7.47	12		0.87		NA
FAL	54.2	19		1.73		< 0.001	16.1	59		1.21		NA
IIVS	36.5	14		1.56		0.026	10.0	13		1.00		NA
Strychnine	199		83	2.30	<0.001		69.3		39	1.84	0.364	
ECBC	389	21		2.59		<0.001	100	76		2.00		NA
FAL	124	16		2.09		0.018	52.5	53		1.72		NA
IIVS	83.5	6		1.92		<0.001	55.1	6		1.74		NA
Thallium Sulfate	7.50		72	0.88	0.165		0.16		23	-0.80	0.405	
ECBC	2.80	24		0.45		NA	0.198	51		-0.70		NA
FAL	13.4	78		1.13		NA	0.153	20		-0.82		NA
IIVS	6.30	28		0.80		NA	0.127	16		-0.90		NA
Trichloroacetic acid	928		27	2.97	0.005		427		24	2.63	0.134	
ECBC	762	13		2.88		0.022	348	18		2.54		NA
FAL	1220	6		3.09		0.002	541	28		2.73		NA
IIVS	801	14		2.90		0.069	394	13		2.60		NA
1,1,1-Trichloroethane	15538		52	4.19	<0.001		NA		NA	NA	NA	
ECBC	NA	NA		NA		NA	8137	7		3.91		NA
FAL	21250	11		4.33		NA	NA	NA		NA		NA
IIVS	9827	2		3.99		NA	NA	NA		NA		NA
Triethylenemelamine	0.568		135	-0.25	<0.001		1.95		12	0.29	0.562	
ECBC	0.086	11		-1.07		<0.001	1.69	57		0.23		NA
FAL	1.45	18		0.16		<0.001	2.03	23		0.31		NA
IIVS	0.169	29		-0.77		0.002	2.13	23		0.33		NA
Triphenyltin hydroxide	0.022		29	-1.66	0.688		0.013		55	-1.89	0.088	
ECBC	0.026	17		-1.59		NA	0.021	32		-1.68		NA
FAL	0.026	81		-1.59		NA	0.007	106		-2.15		NA
IIVS	0.015	55		-1.83		NA	0.011	32		-1.96		NA
Valproic acid	1177		76	3.07	< 0.001		533		28	2.73	0.081	
ECBC	547	12		2.74		NA	468	25		2.67		0.331
FAL	1807	10		3.26		NA	702	23		2.85		0.032
IIVS	NA	NA		NA		NA	430	17		2.63		0.135
Verapamil HCl	35.2		10	1.55	0.230		68.7		14	1.84	0.624	
ECBC	32.0	18		1.51		NA	60.5	22		1.78		NA
FAL	34.6	5		1.54		NA	79.4	42		1.90		NA
IIVS	38.9	11		1.59		NA	66.2	8		1.82		NA
Xylene	NA		NA	NA	NA	NA	NA		NA	NA	NA	
ECBC	NA	NA		NA		NA	NA	NA		NA		NA
FAL	NA	NA		NA		NA	NA	NA		NA		NA
IIVS	724	12		2.86		NA	486	38		2.69		NA

148 <sup>1</sup>Results reported on the same row with chemical names are the means of all the laboratories. Results  
149 reported on the same row as laboratories are the laboratory means.  
150 <sup>2</sup> $p < 0.01$  indicated statistical significance.  
151 <sup>3</sup>Contrasts were performed if ANOVA was significant ( $p < 0.01$ ) to determine which laboratory was  
152 different from the other two laboratories. Significant contrasts were denoted by  $p < 0.01$ . If only two  
153 laboratories reported results, no contrast tests were necessary.  
154 Abbreviations: Laboratories: ECBC- U.S. Army Edgewood Chemical Biological Center; FAL – FRAME  
155 Alternatives Laboratory; IIVS – Institute for In Vitro Sciences. NA - no acceptable  $IC_{50}$  results reported or  
156 calculation was not performed (e.g., for contrast results).  
157

**Table 7-4 Reference Substances with Significant Differences between Laboratories for 3T3 NRU Test Method Results**

Reference Substance	Significant Contrast Results <sup>1</sup>			Insoluble/ Volatile <sup>2</sup>
	ECBC	FAL	IIVS	
Acetylsalicylic acid		H	L	
Arsenic trioxide		L	H	Precipitate
Busulfan		H		
Chloral hydrate	L	H		
Chloramphenicol	L	H		
Citric acid	L	H		
Colchicine	L	H		
Cupric sulfate pentahydrate	X	H	L	
Dibutyl phthalate		H	L	Precipitate
Dichlorvos	L	H		Precipitate
Disulfoton <sup>3</sup>				Precipitate
Ethylene glycol	L			
Glutethimide		H	L	
Haloperidol		H		
Meprobamate	L	H	X	
Phenylthiourea	L	H		
Potassium cyanide	L	H	X	Precipitate /Volatility
Procainamide HCl	L		H	
2-Propanol	L	X	H	Volatility
Propylparaben		H	L	
Sodium selenate	L	H		
Strychnine	H		L	Precipitate
Trichloroacetic acid		H		
1,1,1-Trichloroethane <sup>4</sup>				Precipitate
Triethylenemelamine	L	H		
Valproic acid <sup>5</sup>				Precipitate

<sup>1</sup>Laboratories significantly different from the other two at  $p < 0.01$ . H – Laboratory reported the highest mean  $IC_{50}$ . L – Laboratory reported the lowest mean  $IC_{50}$ . X – Laboratory reported a mean  $IC_{50}$  between the values of the other two laboratories.

<sup>2</sup>From **Table 5-8**. Precipitate reported by at least one laboratory is indicated by “Precipitate”. Use of plate sealers by at least one laboratory to prevent volatile contamination of control wells indicated by “Volatility”.

<sup>3</sup>Significant ANOVA ( $p < 0.01$ ), but no contrast analysis since only two laboratories (ECBC and IIVS) reported  $IC_{50}$  values.

<sup>4</sup>Significant ANOVA ( $p < 0.01$ ), but no contrast results since only two laboratories (FAL and IIVS) reported  $IC_{50}$  values.

<sup>5</sup>Significant ANOVA ( $p < 0.01$ ), but no contrast results since only two laboratories (ECBC and FAL) reported  $IC_{50}$  values.

Laboratories: ECBC- U.S. Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

For the 26 substances that yielded significantly different results among the laboratories, contrast analyses indicated that ECBC and FAL were frequently different from the other laboratories. ECBC tended to report the lowest  $IC_{50}$  values among the laboratories while

FAL tended to report the highest values of the three laboratories. ECBC reported significantly different results from the other two laboratories for 15 of the 26 substances. For 13 of the 15 substances, ECBC reported the lowest mean IC<sub>50</sub> value among the three laboratories. FAL reported significantly different results from the other two laboratories for 20 of the 26 substances. For 18 of the 20 substances, FAL reported the highest mean IC<sub>50</sub> value among the three laboratories. IIVS reported significantly different results for 11 of the 26 substances, with no great majority of highest or lowest IC<sub>50</sub> values.

#### *Differences Among the Laboratories for the NHK NRU Test Method*

The ANOVA results in **Table 7-3** indicate that there were statistically significant ( $p < 0.01$ ) laboratory differences for seven substances. These substances are listed in **Table 7-5** along with columns showing the laboratory statistically significantly differing from the other two laboratories (as indicated by the contrast results), and indications of whether any laboratory reported insolubility or volatility during conduct of the assay. Insolubility was reported for three of the seven substances.

**Table 7-5 Reference Substances with Significant Differences between Laboratories for NHK NRU Test Method Results**

Reference Substance	Significant Contrast Results <sup>1</sup>			Solubility/ Volatility <sup>2</sup>
	ECBC	FAL	IIVS	
Arsenic trioxide		L	H	Precipitate
Citric acid	H	L		Precipitate
Digoxin	H	L		
Dimethylformamide	H		L	
Disulfoton	L	H		Precipitate
Methanol <sup>3</sup>				
Propranolol HCl		H	L	

<sup>1</sup>Laboratories significantly different from the other two at  $p < 0.01$ . H – Laboratory reported the highest mean IC<sub>50</sub>. L – Laboratory reported the lowest mean IC<sub>50</sub>. X – Laboratory reported a mean IC<sub>50</sub> between the values of the other two laboratories.

<sup>2</sup>From **Table 5-8**. Precipitate reported by at least one laboratory is indicated by “Precipitate”. Use of plate sealers by at least one laboratory to prevent volatile contamination of control wells indicated by “Volatility”.

<sup>3</sup>Significant ANOVA ( $p < 0.01$ ), but no contrast results since only two laboratories (FAL and IIVS) reported IC<sub>50</sub> values.

Laboratories: ECBC – U.S. Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

For the seven substances that yielded significantly different results among the laboratories, ECBC and FAL were frequently different from the other laboratories. ECBC tended to report the highest IC<sub>50</sub> value among the laboratories (4/7 substances) while FAL tended to report the lowest values among the three laboratories (3/7 substances).

#### 7.2.2 CV Results for the 3T3 and NHK NRU Test Methods

CV was calculated as described in Section 5.3.3. **Table 7-3** provides the intra- and inter-laboratory CV values for individual substances. **Table 7-6** summarizes the CV results for each test method. **Table 7-6** shows that median and mean CV values were often similar. Median CV values appeared always lower than the corresponding means, which indicated that large individual CV values skewed the CV distributions somewhat to the right.

##### *Intralaboratory CV*

**Table 7-6** shows that both test methods had similar ranges for the intralaboratory CV. The mean intralaboratory CV values were the same, 26%. The median intralaboratory CVs were also similar: 23% for the 3T3 NRU test method and 24% for the NHK NRU test method. Of the three laboratories, FAL had the highest mean and median CV for both test methods and IIVS had the lowest mean and median CV for both test methods.

##### *Interlaboratory CV*

The mean and median interlaboratory CV for the reference substances was lower for the NHK NRU test method (mean = 28%; median = 21%) than for the 3T3 NRU test method (mean = 46%; median = 40%) (see **Table 7-6**).

**Table 7-6 Summary of CV Results for the 3T3 and NHK NRU Test Methods**

CV	3T3 NRU Test Method				NHK NRU Test Method			
	N	Mean	Median	Range	N	Mean	Median	Range
Intralaboratory CV	202	26%	23%	1-122%	208	26%	24%	1-129%
ECBC	68	23%	17%	2-95%	69	23%	19%	2-76%
FAL	66	33%	30%	1-98%	69	42%	32%	1-129%
IIVS	68	21%	13%	1-122%	70	14%	13%	1-38%
Interlaboratory CV	68	46%	40%	2-135%	68	28%	21%	1-99%

Abbreviations: N- number of values. Laboratories: ECBC- U.S. Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

Note: For the 3T3 NRU test method, the following laboratories/substances did not obtain sufficient IC<sub>50</sub> data for the calculation of an intralaboratory CV: carbon tetrachloride at any laboratory; disulfoton at FAL; gibberellic acid at FAL; lithium carbonate at FAL and IIVS; methanol at any laboratory; 1,1,1-trichloroethane at ECBC; valproic acid at IIVS; and xylene at ECBC and FAL. For the NHK assay, the following laboratories/substances did not obtain sufficient IC<sub>50</sub> data for the calculation of an intralaboratory CV: carbon tetrachloride at any laboratory; methanol at ECBC; 1,1,1-trichloroethane at FAL and IIVS; and xylene at ECBC and FAL. For the 3T3 NRU test method, the following substances did not obtain sufficient IC<sub>50</sub> data for the calculation of an interlaboratory CV: carbon tetrachloride, lithium carbonate; methanol; and xylene. For the NHK assay, the following substances did not yield sufficient IC<sub>50</sub> data for the calculation of an interlaboratory CV: carbon tetrachloride; 1,1,1-trichloroethane; and xylene.

#### *Variation of CV with Chemical Property*

To identify the chemical characteristics that may yield high or low CV values, CV values were analyzed to determine their association with the following chemical attributes: physical state (i.e., solid or liquid), solubility, volatility, chemical class, GHS acute oral toxicity class (UN 2005), molecular weight, log K<sub>ow</sub>, IC<sub>50</sub>, and boiling point. For categorical characteristics such as physical form, solubility (i.e., precipitate/no precipitate), volatile/not volatile, and chemical class, the mean CV values and CV ranges for the groups were compared to one another and to the overall mean CV and CV range for each test method. No statistical analyses were performed. For chemical characteristics measured by continuous variables, such as molecular weight, log K<sub>ow</sub>, and IC<sub>50</sub>, and boiling point, Spearman correlation analyses were performed.

#### *Results of Intralaboratory CV Analysis*

**Table 7-7** shows the analysis of intralaboratory CV. The analysis of intralaboratory CV uses one mean intralaboratory CV for each reference substances that was calculated from the

intralaboratory CV values from each laboratory. With the exception of the amides, which had relatively low intralaboratory CV values (for both 3T3 and NHK NRU test methods), and organophosphates and halogenated hydrocarbons (for the 3T3 NRU test method only), which had relatively high intralaboratory CV values, there seemed to be little difference in CV values for the categorical physical/chemical/toxicological attributes. The mean intralaboratory CV values for solids and liquids were similar (26 vs. 24% for the 3T3 NRU test method; 27 vs. 23% for the NHK NRU test method). The mean intralaboratory CV values for reference substances for which precipitates were observed were similar to the mean intralaboratory CV values for substances for which no precipitates were observed (29 vs. 23% for the 3T3 NRU test method; 24 vs. 27% for the NHK NRU test method). The mean intralaboratory CV values for substances that exhibited volatility (i.e., indicated by laboratory use of film plate sealers to prevent contamination of control wells) were relatively similar to those that did not (31 vs. 24% for the 3T3 NRU test method; 27 vs. 26% for the NHK NRU test method). Similarly, the substances grouped by GHS toxicity category (UN 2005) had mean intralaboratory CV values that were similar (19-33% for the 3T3 NRU test method; 18-31% for the NHK NRU test method) to the overall mean CV values (26% for both the 3T3 and NHK NRU test methods).

Reference substances in the amide chemical class had unusually low mean intralaboratory CV values for both the 3T3 NRU test method (13%) and NHK NRU test method (10%) compared with the overall mean CV (26% for both test methods), but there were only three substances in the class (acetaminophen, dimethylformamide, and procainamide HCl). Reference substances in the organophosphate chemical class had unusually high mean intralaboratory CV values for the 3T3 NRU test method (46%), but not for the NHK NRU test method (26%) compared with the overall mean CV (26% for the 3T3 and NHK NRU test methods). There were only three substances in the class (dichlorvos, disulfoton, and parathion), but two of the three substances had relatively high mean intralaboratory CV values (17, 48 and 71%). Halogenated hydrocarbons also had high mean intralaboratory CV for the 3T3 NRU test method (46%), but not for the NHK NRU test method (14%) compared with the overall mean intralaboratory CV for each test method (26%). However, the mean intralaboratory CV for the 3T3 NRU test method was calculated from only two values; 7%

for 1,1,1-trichloroethane and 84% for lindane. No laboratory obtained sufficient toxicity for the calculation of an IC<sub>50</sub> for the carbon tetrachloride, the third halogenated hydrocarbon.

**Table 7-7 Intralaboratory CV by Chemical Characteristics for the 3T3 and NHK NRU Test Methods**

Class/Attribute	3T3 NRU Test Method			NHK NRU Test Method		
	N <sup>a</sup>	Range	Mean	N <sup>b</sup>	Range	Mean
All chemicals	70	1-122%	26%	71	1-129%	26%
<b>Chemical form</b>						
Solid	53	4-84	26	53	6-50	27
Liquid	17	6-71	24	18	2-40	23
<b>Solubility</b>						
Precipitate <sup>c</sup>	24	7-84	29	2 <sup>a</sup>	2-47	24
No precipitate	46	4-55	23	50	7-57	27
<b>Volatility<sup>d</sup></b>						
Volatile	10	6-84	31	9	11-50	27
Nonvolatile	62	4-71	24	63 <sup>b</sup>	2-57	26
<b>Chemical Class</b>						
Alcohols	9	6-42	22	10	10-37	21
Carboxylic acids	12	10-41	20	12	7-48	26
Heterocyclics	14	6-59	30	14	13-50	31
Organophosphorous	3	17-71	46	3	20-32	26
Amides	3	4-28	13	3	2-16	10
Halogenated hydrocarbons	2	7-84	46	2	7-21	14
Inorganics	15	9-43	24	15	6-50	29
<b>Toxicity Class</b>						
≤ 5 mg/kg	7	9-71	33	7	20-40	30
> 5 - ≤ 50	12	13-59	32	12	12-50	31
> 50 - ≤ 300	12	11-84	33	12	17-37	25
> 300 - ≤ 2000	16	4-51	21	16	6-57	25
> 2000 - ≤ 5000	10 <sup>a</sup>	9-32	19	10 <sup>a</sup>	7-50	31
> 5000	13 <sup>b</sup>	6-42	19	14	2-40	18
<b>Correlations</b>	<b>N</b>	<b>r<sub>s</sub></b>	<b>P value</b>	<b>N</b>	<b>r<sub>s</sub></b>	<b>P value</b>
Molecular weight	70 <sup>a,b</sup>	0.323	0.006	71 <sup>b</sup>	0.199	0.097
Log K <sub>ow</sub>	50 <sup>c</sup>	0.117	0.421	51 <sup>c</sup>	0.311	0.026
IC <sub>50</sub>	70 <sup>a,b</sup>	-0.436	0.0002	71 <sup>b</sup>	-0.362	0.002
Boiling point	27	0.576	0.002	28	0.277	0.154

<sup>a</sup>One intralaboratory CV for each chemical was calculated by averaging the CV values for the laboratories that reported sufficient data for the calculation of a CV. No CV was calculable for carbon tetrachloride or methanol.

<sup>b</sup>One intralaboratory CV for each chemical was calculated by averaging the CV values for the laboratories that reported sufficient data for the calculation of a CV. No CV was calculable for carbon tetrachloride.

<sup>c</sup>Denoted by laboratory reports of precipitate in the stock reference substance solutions or in cell culture (see **Table 5-8**).

<sup>d</sup>Denoted by laboratory reports of using plate sealers to avoid contamination of the VC wells (see **Table 5-8**).

<sup>e</sup>Number of reference substances with CV values and log K<sub>ow</sub> data.

<sup>f</sup>Number of reference substances with CV values and boiling point data.



For the characteristics amenable to correlation analysis, none of the correlation coefficients were large (absolute value of  $r_s < 0.6$ ), but several were statistically significantly different from zero for the 3T3 NRU test method. Molecular weight ( $p = 0.006$ ),  $IC_{50}$  ( $p = 0.0002$ ), and boiling point ( $p = 0.002$ ) exhibited statistically significant correlations ( $p < 0.05$ ) to intralaboratory CV for the 3T3 NRU test method. For molecular weight, the higher molecular weight substances had higher intralaboratory CV values. For  $IC_{50}$ , however, the substances with lower  $IC_{50}$  values had higher CV values. The inverse correlation between intralaboratory CV values and  $IC_{50}$  is consistent with the common observation that measurements with very low values tend to have high CV values. The fact that substances with higher boiling points had higher CV values was consistent with the categorical analysis of volatility. The substances that exhibited volatile characteristics (i.e., high reference substance concentration wells contaminated the VC wells) in the 3T3 NRU test method had higher mean intralaboratory CV values (31%) than the substances that did not exhibit volatile characteristics (24%), but the difference did not seem large.

Likewise, for the NHK NRU test method, two of the characteristics amenable to correlation analysis were statistically significantly different from zero, but the correlation coefficients did not have large magnitudes (absolute value of  $r_s < 0.4$ ). Log  $K_{ow}$  ( $p = 0.026$ ) and  $IC_{50}$  ( $p = 0.002$ ) exhibited statistically significant correlations ( $p < 0.05$ ) to intralaboratory CV for the NHK NRU test method. Log  $K_{ow}$  was positively correlated to the mean intralaboratory CV for each substance, but  $IC_{50}$  was negatively correlated to the mean  $IC_{50}$  for each substance.

#### *Results of Interlaboratory CV Analysis*

**Table 7-8** shows the analysis of interlaboratory CV. With the exception of chemical class, there seemed to be little difference in interlaboratory CV values for most of the categorical physical/chemical characteristics. The mean interlaboratory CV values for solids and liquids were similar (48 vs. 46% for the 3T3 NRU test method and 28 vs. 27% for the NHK NRU test method). The mean interlaboratory CV values for substances for which precipitates were observed was similar to the mean interlaboratory CV values for substances for which no

precipitates were observed (56 vs. 43% for the 3T3 NRU test method and 29 vs. 28% for the NHK NRU test method). The mean interlaboratory CV values for substances that exhibited volatile characteristics appeared similar to those that did not (51 vs. 46% for the 3T3 NRU test method and 32 vs. 28% for the NHK NRU test method).

Reference substances in the amide chemical class had unusually low mean interlaboratory CV values for both the 3T3 NRU test method (15%) and NHK NRU test method (16%) compared with the overall mean interlaboratory CV (46% for the 3T3 NRU test method and 28% for the NHK NRU test method). Chemicals in the organophosphate chemical class had unusually high mean interlaboratory CV values for the 3T3 NRU test method (74%) and moderately higher mean interlaboratory CV values for the NHK NRU test method (42%) compared with the overall mean interlaboratory CV (46% for the 3T3 NRU test method and 28% for the NHK NRU test method). The high mean interlaboratory CV value for organophosphates in the NHK NRU test method, however, was produced largely by the high interlaboratory CV of 99% for disulfoton. The interlaboratory CV values for dichlorvos and parathion were 20% and 8%, respectively. Heterocyclic compounds also had higher mean interlaboratory CV values for the 3T3 NRU test method but not for the NHK NRU test method. As a group, the 14 heterocyclic compounds had a mean interlaboratory CV of 61% while the overall mean interlaboratory CV for the 3T3 NRU test method was 46%. Although there were a few low CV values (e.g., 8, 18) in the heterocyclic group, there were seven values greater than the overall mean CV of 46%. The median interlaboratory CV for the heterocyclic group was 52%.

**Table 7-8 Interlaboratory CV by Chemical Characteristics for the 3T3 and NHK NRU Test Methods**

Class/Attribute	3T3 NRU Test Method			NHK NRU Test Method		
	N	Range	Mean	N	Range	Mean
All chemicals	68 <sup>a</sup>	2-135%	46%	69 <sup>b</sup>	1-99%	28%
<b>Chemical Form</b>						
Solids	52	3-135	48	53	1-91	28
Liquids	16	6-124	46	16	1-99	27
<b>Solubility</b>						
Precipitate <sup>c</sup>	22	3-127	56	19	1-99	29
No precipitate	47	3-135	43	50	1-88	28
<b>Volatility</b>						
Volatile <sup>d</sup>	10	21-127	51	9	8-86	32
Nonvolatile	58	3-135	46	60	1-99	28
<b>Chemical Class</b>						
Alcohols	9	12-119	38	10	11-42	22
Carboxylic acids	12	12-124	46	12	1-61	27
Heterocyclics	14	8-135	61	14	5-85	32
Organophosphorous	3	57-111	74	3	8-99	42
Amides	3	6-28	15	3	13-19	16
Halogenated hydrocarbons	2	52-58	55	1	20	20
Inorganics	14	3-127	48	15	4-91	29
<b>Toxicity Class</b>						
≤ 5 mg/kg	7	12-135	69	7	12-99	37
> 5 - ≤ 50	12	33-127	78	12	8-91	41
> 50 - ≤ 300	12	8-120	37	12	10-41	26
> 300 - ≤ 2000	15	11-85	38	15	1-61	20
> 2000 - ≤ 5000	9	3-69	29	9	1-85	27
> 5000	13	3-124	39	13	2-44	25
<b>Correlations</b>		<b>r<sub>s</sub></b>	<b>P value</b>		<b>r<sub>s</sub></b>	<b>P value</b>
Molecular weight	68	0.193	0.115	69	0.136	0.265
Log K <sub>ow</sub>	49 <sup>e</sup>	0.194	0.182	49	0.170	0.244
IC <sub>50</sub>	68	-0.295	0.015	69	-0.271	0.024
Boiling point	24 <sup>f</sup>	0.467	0.021	26	-0.131	0.525

<sup>a</sup>The following chemicals did not have sufficient IC<sub>50</sub> data for the calculation of an interlaboratory CV: carbon tetrachloride, lithium carbonate; methanol; and xylene.

<sup>b</sup>The following substances did not yield sufficient IC<sub>50</sub> data for the calculation of an interlaboratory CV: carbon tetrachloride; 1,1,1-trichloroethane; and xylene.

<sup>c</sup>Denoted by laboratory reports of precipitate in the stock reference substance solutions or in cell culture (see **Table 5-8**).

<sup>d</sup>Denoted by laboratory reports of using plate sealers to avoid contamination of the VC wells (see **Table 5-8**).

<sup>e</sup>Number of reference substances with CV values and log K<sub>ow</sub> data.

<sup>f</sup>Number of reference substances with CV values and boiling point data.

Mean interlaboratory CV values tended to be large for chemicals in the most toxic GHS acute categories, especially for the 3T3 NRU test method. For the 3T3 NRU test method, the mean interlaboratory CV for chemicals in the classes for LD<sub>50</sub> ≤ 5 mg/kg (69%) and 5 < LD<sub>50</sub>

≤ 50 mg/kg (78%) were much larger than the mean overall interlaboratory CV (46%). For the NHK NRU test method, the mean interlaboratory CV for chemicals in the classes for  $5 < LD_{50} \leq 5$  mg/kg (37%) and  $5 < LD_{50} \leq 50$  mg/kg (41%) were much larger than the mean overall interlaboratory CV (28%).

For the characteristics amenable to correlation analysis, none of the correlation coefficients were large (absolute value of  $r_s < 0.5$ ), but  $IC_{50}$  ( $p = 0.015$ ) and boiling point ( $p = 0.021$ ) exhibited statistically significant correlations ( $p < 0.05$ ) to interlaboratory CV for the 3T3 NRU test method. There was a negative correlation between interlaboratory CV and  $IC_{50}$ , but the correlation between boiling point and interlaboratory CV was positive. The positive correlation of CV with boiling point was largely consistent with the categorical analysis of volatility. The substances that exhibited volatile characteristics in the 3T3 NRU test method had slightly higher mean CV than for the substances that did not exhibit volatile characteristics (51 vs. 46%). For the NHK NRU test method, only  $IC_{50}$  was significantly correlated ( $p = 0.024$ ) to interlaboratory CV with a negative correlation ( $r_s = -0.271$ ).

#### 7.2.3 Comparison of Laboratory-Specific Linear Regression Analyses for the Prediction of *In Vivo* Rodent $LD_{50}$ Values from *In Vitro* NRU $IC_{50}$ Values

The laboratory-specific regressions presented in **Table 6-1** of **Section 6.1.1** were compared to one another (for each test method) with a goodness of fit F-test as described in **Section 5.3.3**. The comparisons indicated that the laboratory-specific regressions for both test methods were not significantly different ( $p < 0.05$ ) from one another. The comparison of the laboratory-specific 3T3 NRU regressions to one another yielded  $p = 0.796$ . The comparison of the laboratory-specific NHK NRU regressions to one another yielded  $p = 0.985$ . Because the laboratory-specific regressions were not statistically different, data were combined into a single regression for each test method using a geometric mean of the laboratory-specific  $IC_{50}$  values for each substance (see **Section 6.1.1**).

#### 7.2.4 Laboratory Concordance for the Prediction of GHS Acute Oral Toxicity Category

This section provides the percentage of substances for which the laboratory-specific  $IC_{50}$  data yielded the same (for all three laboratories) GHS toxicity categorization when used with the

regressions evaluated in **Sections 6.3.1** through **6.3.3**. Data for the same reference substances for each test method were evaluated to determine the laboratory concordance for each regression. Forty-three substances were evaluated for the 3T3 NRU test method and 44 substances were evaluated for the NHK NRU test method. Of the original 72 substances tested, epinephrine bitartrate, colchicine, and propylparaben were excluded from all analyses because they were removed from the calculation of the RC rat-only weight regressions due to the lack of rat oral reference LD<sub>50</sub> data. The 21 substances with specific mechanisms of toxicity in **Table 6-3** were excluded from all analyses to be consistent with those removed from the RC rat-only weight regression excluding substances with specific mechanisms of toxicity. These substances have known mechanisms of toxicity that are not expected to be active in the 3T3 or NHK cell cultures. Carbon tetrachloride, methanol, gibberellic acid, lithium carbonate, and xylene were excluded from the 3T3 NRU evaluations because at least one laboratory failed to attain sufficient toxicity in any test for the calculation of an IC<sub>50</sub>. Carbon tetrachloride, methanol, 1,1,1-trichloroethane, and xylene were excluded from the NHK NRU analyses because at least one laboratory failed to attain sufficient toxicity in any test for the calculation of an IC<sub>50</sub>.

#### *Laboratory Concordance for the 3T3 and NHK NRU Test Methods with the RC Millimole Regression*

**Appendix J** (**Table J-1** for the 3T3 NRU test method and **Table J-3** for the NHK NRU test method) shows the laboratory concordance of the observed (i.e., *in vivo* categories for the initial LD<sub>50</sub> values in **Table 3-2**) and predicted GHS toxicity categories for each substance determined in each *in vitro* NRU cytotoxicity test method using the laboratory-specific geometric mean IC<sub>50</sub> values and the RC millimole regression,  $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \times \log \text{IC}_{50} (\text{mM}) + 0.625$ . The observed LD<sub>50</sub> values are the rodent LD<sub>50</sub> values from **Table 3-2**.

For the 43 substances that yielded IC<sub>50</sub> results in all laboratories using the 3T3 NRU test method, the laboratories agreed on the GHS toxicity category for 31 substances (72%). The 12 substances that produced discordant results among the laboratories were cupric sulfate pentahydrate, cycloheximide, dimethylformamide, diquat dibromide, phenol, phenylthiourea,

sodium arsenite, sodium oxalate, sodium selenate, thallium sulfate, triethylenemelamine, and 1,1,1-trichloroethane. The laboratory predictions for these substances disagreed by one GHS toxicity category.

For the 44 substances that yielded IC<sub>50</sub> results in all laboratories using the NHK NRU test method, the laboratories agreed on toxicity category for 39 substances (89%). The five substances that produced discordant results among the laboratories were arsenic trioxide, digoxin, ethanol, 2-propanol, and sodium arsenite. The laboratory predictions for these substances disagreed by one toxicity category. Laboratory concordance was greater for the NHK assay than for the 3T3 assay (89% vs 72%).

*Laboratory Concordance of the 3T3 and NHK NRU Test Methods with the RC Rat-Only Weight Regression*

**Appendix J** (**Table J-5** for the 3T3 NRU test method and **Table J-6** for the NHK NRU test method) shows the laboratory concordance of the observed (i.e., *in vivo* reference categories for LD<sub>50</sub> values in **Table 4-2**) and predicted GHS toxicity categories for each substance as determined for each test method using the laboratory-specific geometric mean IC<sub>50</sub> in the RC rat-only weight regression,  $\log \text{LD}_{50} (\text{mg/kg}) = \log \text{IC}_{50} (\mu\text{g/mL}) \times 0.372 + 2.024$ , from **Table 6-2**.

For the 43 substances that yielded IC<sub>50</sub> results in all laboratories using the 3T3 NRU test method, the laboratories agreed on the GHS toxicity category for 34 substances (79%). The nine substances that produced discordant results among the laboratories were boric acid, cupric sulfate pentahydrate, cycloheximide, 2-propanol, propranolol HCl, sodium selenate, thallium sulfate, triethylenemelamine, and 1,1,1-trichloroethane. The laboratory predictions for these substances disagreed by one GHS toxicity category.

For the 44 substances that yielded IC<sub>50</sub> results in all laboratories using the NHK NRU test method, the laboratories agreed on toxicity category for 39 substances (89%). The five substances that produced discordant results among the laboratories were arsenic trioxide, digoxin, glycerol, sodium chloride, and thallium sulfate. The laboratory predictions for these

substances disagreed by one toxicity category. Laboratory concordance was greater for the NHK assay than for the 3T3 assay (89% vs 79%).

*Laboratory Concordance of the 3T3 and NHK NRU Test Methods with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity*

**Appendix J** (**Table J-7** for the 3T3 NRU test method and **Table J-8** for the NHK NRU test method) shows the laboratory concordance of the observed (i.e., *in vivo*) and predicted GHS toxicity categories for each substance as determined for each test method using the laboratory-specific geometric mean  $IC_{50}$  values in the RC rat-only weight regression after exclusion of substances with specific mechanisms of toxicity,  $\log LD_{50} \text{ (mg/kg)} = \log IC_{50} \text{ (}\mu\text{g/mL)} \times 0.357 + 2.194$  (**Table 6-2**).

For the 43 substances considered in the analysis of the 3T3 NRU test method, the three laboratories agreed on the toxicity category for 36 (84%) of the substances. The seven substances that produced discordant results among the laboratories were boric acid, cupric sulfate pentahydrate, diquat dibromide, sodium hypochlorite, thallium sulfate, 1,1,1-trichloroethane, and valproic acid. The laboratory predictions for these substances disagreed by one GHS toxicity category.

The extent of laboratory concordance for the RC rat-only weight regression after excluding substances with specific mechanisms of toxicity was the same for the NHK NRU test method (i.e., 84%, 37/44). The seven substances that produced discordant results among the laboratories were arsenic trioxide, digoxin, glycerol, hexachlorophene, mercury chloride, sodium chloride, and sodium hypochlorite. The laboratory predictions for these substances disagreed by one GHS toxicity category.

### **7.3 Historical Positive Control Data**

The reproducibility of the positive control (SLS) data was assessed by CV analysis, ANOVA, and linear regression over time as described in **Section 5.3.4**. The SLS data analyzed for variability are slightly different from those used to determine the PC acceptance

limits shown in **Table 5-2**. To get an assessment of the true variation of SLS IC<sub>50</sub> values, the reproducibility analyses included IC<sub>50</sub> values from SLS tests that failed the test acceptance criterion for the IC<sub>50</sub> acceptance limits determined for each study phase. These additional SLS tests, however, passed all other test acceptance criteria. If more than one SLS test was performed in a single day (for each test method and laboratory), the IC<sub>50</sub> values were averaged to determine a single IC<sub>50</sub> for the day so that multiple results from a single day would not overly influence the average for each phase.

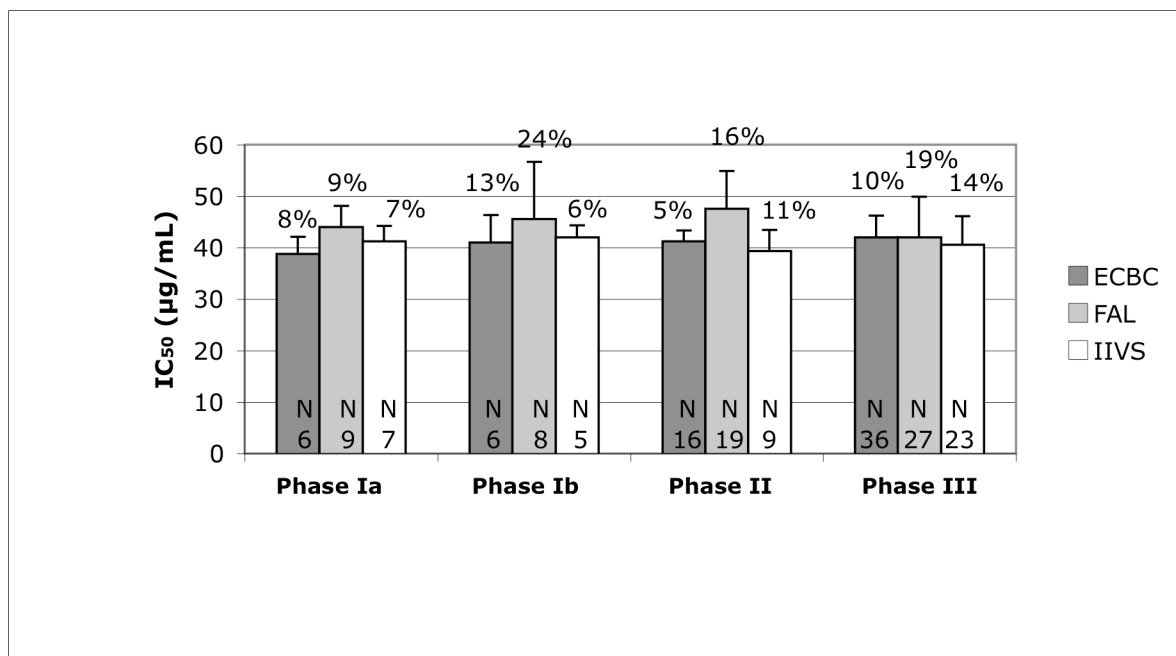
**Figure 7-1** shows the average SLS IC<sub>50</sub> values for each test method, laboratory, and study phase. Graphically, it appears that the SLS IC<sub>50</sub> for the 3T3 NRU test method was relatively consistent over the entire period of the study (approximately 2.5 years). The intralaboratory CV values (shown in **Figure 7-1**) for the individual study phases ranged from 5% to 24%. With the exception of the Phase Ib CV at FAL, the CV values for each laboratory and phase were less than 20%. The interlaboratory CV values were even smaller: 6% for Phases Ia and Ib; 10% for Phase II; and 2% for Phase III.

**Figure 7-1** shows that the SLS IC<sub>50</sub> for the NHK NRU test method tended to vary with time, but, with the exception of the SLS IC<sub>50</sub> results from FAL, there appeared to be no consistent trend. The IC<sub>50</sub> values from FAL, which changed NHK cell culture methods after Phase Ib (see **Section 5.1.3**), tended to decrease over time. Although the change in cell culture methods reduced the magnitude of the IC<sub>50</sub>, the variability (as evidenced by the intralaboratory CV values shown in **Figure 7-1**) remained relatively high (CV ≥ 34% for all FAL study phases). The CV values for all the laboratories and study phases indicated that the SLS IC<sub>50</sub> values for the NHK NRU test method was more variable within laboratories than the SLS IC<sub>50</sub> for 3T3 NRU test method. CV values for the SLS IC<sub>50</sub> for the NHK NRU test method ranged from 11 to 51%, with nine of the 12 values greater than 20%. The interlaboratory CV values, which were also greater than those for the 3T3 NRU test method, were: 39% for Phase Ia; 21% for Phase Ib; and 31% for Phase II; and 8% for Phase III.



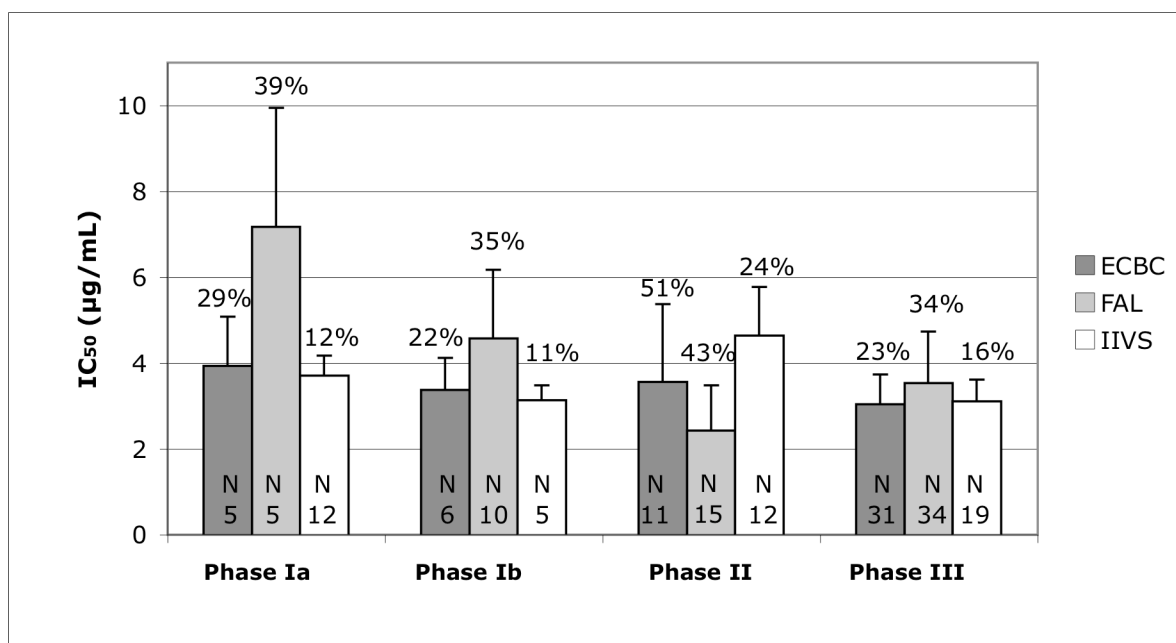
526 **Figure 7-1 SLS IC<sub>50</sub> for Each Laboratory and Study Phase**

527 a 3T3 NRU Test Method



528

529 b NHK NRU Test Method



530

531 Bars show mean IC<sub>50</sub> values. Error bars show standard deviation. Percent values above error bars are  
532 intralaboratory CVs.

533 Laboratories: ECBC- U.S. Army Edgewood Chemical Biological Center; FAL – FRAME

534 Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

535

### 7.3.1 ANOVA and Linear Regression Results for the 3T3 NRU Test Method

#### *SLS IC<sub>50</sub> Variation with Time*

**Table 7-9** shows the ANOVA results for SLS from the 3T3 NRU test method. When the IC<sub>50</sub> values within each laboratory were compared by study phase (i.e., the ANOVA factor was study phase), there were no statistically significant differences ( $p < 0.01$ ) between study phases for any laboratory. **Table 7-10** shows that the slopes of the linear regressions of the IC<sub>50</sub> values over time (expressed as index values) were statistically different from zero for ECBC and FAL ( $p = 0.001$  and  $0.012$ , respectively). Since the slopes were so small ( $0.000204$  and  $-0.000324$ ), they were considered to be unimportant. The slope of the IIVS regression of SLS IC<sub>50</sub> over time was not statistically different from zero ( $p = 0.651$ ; **Table 7-10**), which was entirely consistent with the ANOVA (**Table 7-9**) indicating that SLS IC<sub>50</sub> from IIVS did not vary with study phase ( $p = 0.854$ ). The ANOVA with study phase as the factor (with laboratories combined) indicated that the 3T3 NRU IC<sub>50</sub> values from all the laboratories were consistent over time since data from the various study phases were not statistically significantly different ( $p = 0.304$ ).

#### *Comparison of SLS IC<sub>50</sub> Among the Laboratories*

When all study phases from each laboratory were combined, ANOVA, with laboratory as the factor, indicated that the SLS IC<sub>50</sub> for the 3T3 NRU test method differed in some statistically significant fashion among the laboratories ( $p < 0.006$ ). However, the differences between laboratories look rather small in **Figure 7-1** since the SDs for the laboratories clearly overlap one another.

560 **Table 7-9 ANOVA Results for SLS IC<sub>50</sub> from the 3T3 NRU Test Method**

Study Phase/ Laboratory	ECBC				FAL				IIVS			
	Log Mean IC <sub>50</sub> (mM)	SD	N	P <sup>1</sup>	Log Mean IC <sub>50</sub> (mM)	SD	N	P <sup>1</sup>	Log Mean IC <sub>50</sub> (mM)	SD	N	P <sup>1</sup>
<i>Test for differences between phases within each laboratory</i>												
Phase Ia	-0.876	0.042	6	0.031	-0.811	0.046	9	0.015	-0.850	0.034	7	0.854
Phase Ib	-0.864	0.066	6		-0.846	0.065	8		-0.838	0.025	5	
Phase II	-0.848	0.027	16		-0.796	0.057	19		-0.854	0.025	8	
Phase III	-0.842	0.036	36		-0.851	0.066	27		-0.844	0.041	23	
<i>Test for differences between laboratories (phases combined)</i>												
All Phases	-0.849	0.039	64	0.006	-0.826	0.062	63		-0.847	0.035	44	
<i>Test for differences between phases (laboratories combined)</i>												
Phase Ia	-0.839	0.049	22	0.304								
Phase Ib	-0.850	0.056	19									
Phase II	-0.831	0.047	34									
Phase III	0.845	0.045	86									

<sup>1</sup> Statistically significant at p < 0.01.

Abbreviations: N- number of values; SD – standard deviation. Laboratories: ECBC- U.S. Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

**Table 7-10 Linear Regression Analysis of SLS IC<sub>50</sub> Over Time<sup>1</sup>**

Test Method/ Laboratory	Slope	P-value (Slope) <sup>2</sup>	Intercept
<b>3T3 NRU</b>			
ECBC	0.000204	0.001	-0.874
FAL	-0.000324	0.012	-0.796
IIVS	0.0000304	0.651	-0.850
<b>NHK NRU</b>			
ECBC	-0.000559	0.002	-1.901
FAL	-0.00112	< 0.001	-1.737
IIVS	-0.000445	0.002	-1.885

<sup>1</sup>Time was expressed as index values. The index value of each test reflected the order of testing without respect to the time lapsing between tests.

<sup>2</sup>Statistically significant from zero at  $p < 0.05$ .

Laboratories: ECBC- U.S. Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

### 7.3.2 ANOVA and Linear Regression Results for the NHK NRU Test Method

#### *SLS IC<sub>50</sub> Variation with Time*

**Table 7-11** shows the ANOVA results for the NHK NRU test method. When the IC<sub>50</sub> values within each laboratory were compared by study phase (i.e., the ANOVA factor was phase), the phases were statistically different ( $p < 0.01$ ) at each laboratory. The IC<sub>50</sub> values from the various study phases were also significantly different from one another when the laboratory data were combined ( $p < 0.001$ ). Linear regression analyses showed that the slopes for IC<sub>50</sub> over time (expressed as an index values) were statistically significantly greater than zero for each laboratory (see **Table 7-10**). Since the slopes were so small (-0.000559, -0.00112, and -0.000445), they were considered to be unimportant.

583 **Table 7-11 ANOVA Results for SLS IC<sub>50</sub> from the NHK NRU Test Method**

Study Phase/ Laboratory	ECBC				FAL				IIVS			
	Log Mean IC <sub>50</sub> (mM)	SD	N	P <sup>1</sup>	Log Mean IC <sub>50</sub> (mM)	SD	N	P <sup>1</sup>	Log Mean IC <sub>50</sub> (mM)	SD	N	P <sup>1</sup>
<i>Test for differences between phases within each laboratory</i>												
Phase Ia	-1.867	0.135	5	0.001	-1.656	0.125	5	< 0.001	-1.904	0.060	12	< 0.001
Phase Ib	-1.936	0.092	6		-1.829	0.141	10		-1.965	0.046	5	
Phase II	-2.007	0.109	11		-1.982	0.173	15		-1.863	0.058	12	
Phase III	-1.990	0.098	31		-1.941	0.113	34		-1.972	0.070	19	
<i>Test for differences between laboratories (phases combined)</i>												
All Phases	-1.971	0.113	53	< 0.001	-1.879	0.175	64		-1.924	0.073	48	
<i>Test for differences between phases (laboratories combined)</i>												
Phase Ia	-1.833	0.143	22	< 0.001								
Phase Ib	-1.891	0.125	21									
Phase II	-1.964	0.139	38									
Phase III	-1.971	0.100	84									

<sup>1</sup> Statistically significant at p < 0.01.

Abbreviations: N- number of values; SD – standard deviation. Laboratories: ECBC – U.S. Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences.

### Comparison of SLS IC<sub>50</sub> Among the Laboratories

The ANOVA results, with laboratory as a factor (**Table 7-11**) indicated that the SLS IC<sub>50</sub> was statistically different among the laboratories when the data from the study phases were pooled ( $p < 0.001$ ). **Figure 7-1** shows that the SLS data from ECBC and IIVS were rather similar for Phases Ia, Ib, and III. The SLS IC<sub>50</sub> data from FAL looks different from the other two laboratories for Phases Ia, Ib, and II, but the bars and SDs for Phase III show that the data from all laboratories were similar.

## 7.4 Laboratory Concordance for Solvent Selection

The solvents used to dissolve the reference substances are shown in **Table 7-12**. For Phases Ib and II, the SMT selected the solvents to use for cytotoxicity testing based on the solubility results provided by BioReliance (see **Table 5-7**) using the solubility protocol in **Appendix G2**. Despite the fact that the solubility of an individual substance in 3T3 medium and NHK medium might be different, the SMT chose the same solvent for both test methods, rather than choosing one for the 3T3 assay and one for the NHK assay. For example, if solubility in the 3T3 medium was  $\geq 2$  mg/mL and solubility in the NHK medium was  $< 2$  mg/mL, and the substance was soluble in DMSO at 200 mg/mL, then the SMT selected DMSO as the solvent for cytotoxicity testing.

During Phases Ib and II, the SMT noted that BioReliance sometimes achieved higher solubility than the cytotoxicity laboratories (e.g., see the results for arsenic trioxide, aminopterin, and chloramphenicol in **Table 5-7**). In an attempt to avoid the selection of a solvent for which one or more laboratories could not achieve the desired solubility, the SMT used the solubility data from all the laboratories to determine solvent selections for cytotoxicity testing in Phase III. The SMT viewed BioReliance's NHK and 3T3 media solubility results for each substance in Phases Ib and II to be one result for media and took a similar approach in Phase III when considering all the laboratory results to determine the solvent to use for cytotoxicity testing. For example, if one laboratory had achieved solubility at 2 mg/mL in medium, but the other laboratories had not, and the substance was soluble in DMSO at 200 mg/mL, then the SMT selected DMSO as the solvent. **Table 7-12** shows that

cell culture medium was used to test as the solvent for 38 substances and DMSO was used as the solvent for 34 substances.

The solubility protocol used by the cytotoxicity laboratories failed to guide the selection of a solvent for five substances because they were insoluble at all concentrations tested in at least one laboratory. Arsenic trioxide was insoluble at all the cytotoxicity laboratories. IIVS also found sodium oxalate, strychnine, and triethylenemelamine insoluble in any solvent, and FAL found thallium sulfate insoluble in any solvent. To select a solvent for cytotoxicity testing of these substances, the SMT used the solubility results from the laboratories that did achieve solubility.

**Table 7-12 Solvent Determinations by Laboratory**

Reference Substance	Solvent for Testing <sup>1</sup>	ECBC	FAL	IIVS
Acetaminophen	DMSO	Medium	Medium	DMSO
Acetonitrile	Medium	Medium	Medium	Medium
Acetylsalicylic acid	DMSO	Medium	DMSO	Medium
Aminopterin	DMSO	DMSO	DMSO	DMSO
5-Aminosalicylic acid	Medium	Medium	Medium	Medium
Amitriptyline HCl	DMSO	DMSO	DMSO	DMSO
Arsenic III trioxide	Medium	ID	ID	ID
Atropine sulfate	Medium	Medium	Medium	Medium
Boric acid	Medium	Medium	Medium	Medium
Busulfan	DMSO	DMSO	DMSO	DMSO
Cadmium II chloride	DMSO	DMSO	DMSO	DMSO
Caffeine	Medium	Medium	Medium	Medium
Carbamazepine	DMSO	Medium	DMSO	DMSO
Carbon tetrachloride	DMSO	Medium	DMSO	Medium
Chloral hydrate	Medium	Medium	Medium	Medium
Chloramphenicol	DMSO	DMSO	DMSO	Medium
Citric acid	Medium	Medium	Medium	Medium
Colchicine	Medium	Medium	Medium	Medium
Cupric sulfate pentahydrate	Medium	Medium	Medium	Medium
Cycloheximide	Medium	Medium	Medium	Medium
Dibutyl phthalate	DMSO	DMSO	DMSO	DMSO
Dichlorvos (DDVP)	DMSO	Medium	DMSO	Medium
Diethyl phthalate	DMSO	DMSO	DMSO	DMSO
Digoxin	DMSO	DMSO	DMSO	DMSO
Dimethylformamide	Medium	Medium	Medium	Medium
Diquat dibromide monohydrate	Medium	Medium	Medium	Medium
Disulfoton	DMSO	DMSO	DMSO	DMSO
Endosulfan	DMSO	DMSO	DMSO	DMSO
Epinephrine bitartrate	Medium	Medium	Medium	Medium
Ethanol	Medium	Medium	Medium	Medium
Ethylene glycol	Medium	Medium	Medium	Medium
Fenpropathrin	DMSO	DMSO	DMSO	DMSO

**Table 7-12 Solvent Determinations by Laboratory**

Reference Substance	Solvent for Testing <sup>1</sup>	ECBC	FAL	IIVS
Gibberellic acid	Medium	Medium	Medium	Medium
Glutethimide	DMSO	DMSO	DMSO	DMSO
Glycerol	Medium	Medium	Medium	Medium
Haloperidol	DMSO	DMSO	DMSO	DMSO
Hexachlorophene	DMSO	DMSO	DMSO	DMSO
Lactic acid	Medium	Medium	Medium	Medium
Lindane	DMSO	DMSO	DMSO	DMSO
Lithium I carbonate	Medium	Medium	Medium	Medium
Meprobamate	DMSO	Medium	Medium	DMSO
Mercury II chloride	DMSO	DMSO	DMSO	DMSO
Methanol	DMSO	Medium	Medium	DMSO
Nicotine	Medium	Medium	Medium	Medium
Paraquat	Medium	Medium	Medium	Medium
Parathion	DMSO	DMSO	DMSO	DMSO
Phenobarbital	DMSO	Medium	DMSO	DMSO
Phenol	Medium	Medium	Medium	Medium
Phenylthiourea	DMSO	DMSO	Medium	DMSO
Physostigmine	DMSO	Medium	DMSO	DMSO
Potassium I chloride	Medium	Medium	Medium	Medium
Potassium cyanide	Medium	Medium	Medium	Medium
Procainamide HCl	Medium	Medium	Medium	Medium
2-Propanol	Medium	Medium	Medium	Medium
Propranolol HCl	DMSO	Medium	Medium	Medium
Propylparaben	DMSO	DMSO	DMSO	DMSO
Sodium arsenite	Medium	Medium	Medium	Medium
Sodium chloride	Medium	Medium	Medium	Medium
Sodium dichromate dihydrate	Medium	Medium	Medium	Medium
Sodium fluoride	Medium	Medium	Medium	Medium
Sodium hypochlorite	Medium	Medium	Medium	Medium
Sodium oxalate	Medium	Medium	Medium	ID
Sodium selenate	Medium	Medium	Medium	Medium
Strychnine	Medium	Medium	Medium	ID
Thallium I sulfate	Medium	Medium	ID	Medium
Trichloroacetic acid	Medium	Medium	Medium	Medium
1,1,1-Trichloroethane	Medium	Medium	Medium	Medium
Triethylenemelamine	DMSO	Medium	DMSO	ID
Triphenyltin hydroxide	DMSO	DMSO	DMSO	DMSO
Valproic acid	DMSO	Medium	DMSO	DMSO
Verapamil HCl	DMSO	DMSO	DMSO	DMSO
Xylene	DMSO	DMSO	DMSO	DMSO
DMSO Total	34	22	29	28
Medium Total	38	49	41	40

ID-insufficient data to select solvent.

<sup>1</sup>Solvents for testing as determined by the SMT and used in the study by each laboratory: Medium = cell culture medium; DMSO = dimethyl sulfoxide

ECBC – US Army Edgewood Chemical Biological Center; FAL – FRAME Alternatives Laboratory; IIVS – Institute for In Vitro Sciences



The cytotoxicity laboratories selected the same solvent for 55 of the 72 reference substances (76%). Excluding the five substances that were found to be insoluble in any solvent by at least one laboratory, there were 12 substances for which the cytotoxicity laboratories disagreed: acetaminophen, acetylsalicylic acid, carbamazepine, carbon tetrachloride, chloramphenicol, dichlorvos, meprobamate, methanol, phenobarbital, phenylthiourea, physostigmine, and valproic acid. Every laboratory reported relatively low solubility,  $\leq 2$  mg/mL, in medium for these substances. Since 2 mg/mL in medium is the departure point for the selection medium or DMSO, a small variation in results causes the laboratories to select different solvents. The solubility of acetaminophen, for example was reported as 2 mg/mL in culture media by ECBC and FAL, but  $< 2$  mg/mL by IIVS. IIVS found it soluble in 200 mg/mL DMSO and selected DMSO as the solvent. ECBC and FAL selected the culture media as the solvent. The SMT selected DMSO as the solvent for acetaminophen to be used by all laboratories.

## 7.5 Summary

Intra- and inter-laboratory reproducibility were assessed using ANOVA, CV analysis, comparison of the laboratory-specific  $IC_{50}$ - $LD_{50}$  regressions to one another (for each test method) and laboratory concordance for the GHS acute oral toxicity category predictions. ANOVA permits statistical comparisons of laboratories and experimental averages, while controlling for other factors. CV analysis is an empirical way of expressing the relative magnitudes of variability on a standardized scale. ANOVA results for the reference substances showed significant laboratory differences for 26 substances for the 3T3 NRU test method and seven substances for the NHK test method. Intralaboratory CV values were 1-122% for the 3T3 NRU test method and 1-129% for the NHK NRU test method. Mean intralaboratory CV values were 26% for both test methods, but the NHK NRU test method had a lower interlaboratory CV (28% vs 46%). Interlaboratory CV values were 2-135% for the 3T3 NRU test method and 1-99% for the NHK NRU test method. FAL had the highest mean intralaboratory CV for both test methods (33% for the 3T3 NRU test method and 42% for the NHK NRU test method).

An analysis to determine the relationship between the chemical attributes and interlaboratory CV indicated that physical form, solubility, and volatility had little effect on CV. CV seemed to be related, however, to chemical class, GHS acute toxicity category,  $IC_{50}$ , and boiling point. Reference substances in the amide class had unusually low mean interlaboratory CV values for both the 3T3 NRU test method (15%) and NHK NRU test method (16%) compared with the overall mean interlaboratory CV values (46% for the 3T3 NRU test method and 28% for the NHK NRU test method). Reference substances in the organophosphate and heterocyclic classes had unusually high mean interlaboratory CV values for the 3T3 NRU test method (74% and 71%, respectively), but not for the NHK NRU test method. Mean interlaboratory CV values were large for substances in the most toxic GHS acute categories, especially for the 3T3 NRU test method. The mean interlaboratory CV for substances in the classes for  $LD_{50} \leq 5$  mg/kg (69%) and  $5 < LD_{50} \leq 50$  mg/kg (78%) were larger than the mean overall interlaboratory CV (46%,) for the 3T3 NRU test method. For the NHK NRU test method, the mean interlaboratory CV was 37% for substances with  $LD_{50} \leq 5$  mg/kg and 41% for substances with  $5 < LD_{50} \leq 50$  mg/kg while the mean overall interlaboratory CV was 28%. A Spearman correlation analysis indicated that  $IC_{50}$  was negatively correlated to interlaboratory CV for both 3T3 ( $p = 0.015$ ) and NHK ( $p = 0.024$ ) NRU test methods and that boiling point was positively correlated to interlaboratory CV ( $p = 0.021$ ) for the 3T3 NRU test method.

The analysis of interlaboratory reproducibility by evaluating the similarity of the laboratory specific  $IC_{50}$ - $LD_{50}$  regressions indicated that the laboratory regressions for both test methods were not significantly different ( $p < 0.05$ ) from one another ( $p = 0.796$  for the 3T3 NRU and  $p = 0.985$  for the NHK NRU). The evaluation of laboratory concordance for the prediction of GHS acute oral toxicity category when the laboratory-specific  $IC_{50}$  data were applied to the same regression yielded the following proportions of substances for which all laboratories agreed on the GHS acute oral toxicity categorization:

- 78% (52/67) for the 3T3 NRU and 87% (59/68) for the NHK NRU with the RC regression
- 81% (52/64) for the 3T3 NRU and 91% (59/65) for the NHK NRU with the RC rat only weight regression

- 84% for the both test methods (36/43 for the 3T3 NRU and 37/44 for the NHK NRU) with the RC rat only weight regression excluding substances with specific mechanisms of action

ANOVA results for the positive control, SLS, IC<sub>50</sub> in the 3T3 NRU test method indicated that there were significant differences among laboratories ( $p = 0.006$ ) and but not between study phases within laboratories ( $p > 0.01$ ). However, interlaboratory CV values, which ranged from 2% to 10% for the study phases, indicated that the laboratories were similar. Intralaboratory CV values for the study phases ranged from 5% to 24%. SLS IC<sub>50</sub> values for the NHK NRU test method were more variable than those for the 3T3 NRU test method. ANOVA results for SLS in the NHK NRU test method indicated that there were significant differences between laboratories ( $p < 0.001$ ) and between study phases within laboratories ( $p \leq 0.001$ ). A change in cell culture methods at FAL decreased the SLS IC<sub>50</sub> from Phase Ib to Phase II. Intralaboratory CV values for the NHK NRU SLS IC<sub>50</sub> during the various study phases ranged from 11% to 51%. Interlaboratory CV values for SLS in the NHK NRU test method ranged from 8% to 39%.

Cell culture medium was used as the solvent for testing 38 substances and DMSO was used for 34 substances. The laboratory concordance in selecting solvent for the reference substances using the solubility protocol was 76% (55/72).

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## 8.0 3T3 AND NHK NRU TEST METHOD DATA QUALITY

This section of the BRD presents the extent of adherence to national and international GLP guidelines during for generation of the NICEATM/ECVAM validation study data. Data quality is described along with any deviations from the guidelines and the impact of any noncompliance. Statistical results are provided to show comparison of data generation, collection, and reporting of the two GLP adherent cytotoxicity testing laboratories and the one non-GLP adherent cytotoxicity testing laboratory as well as the GLP laboratory that distributed the reference substances and performed solubility studies. Discussions of various quality assurance aspects of the study are included.

### 8.1 Adherence to Good Laboratory Practice Guidelines

#### 8.1.1 Guidelines Followed for *In Vitro* NRU Cytotoxicity Testing

##### *Good Laboratory Practices*

The SOW provided the following definition of U.S. Regulatory agency GLPs to each laboratory:

*“Regulations governing the conduct, procedures, and operations of toxicology laboratories; regulations to assure the quality and integrity of the data and to address such matters as organization and personnel, facilities, equipment, facility operations, test and control articles, and validation study protocol, and conduct (U.S. Food and Drug Administration, Title 21 CFR Part 58; U.S. Environmental Protection Agency, Title 40 CFR Part 160).”*

IIVS, ECBC, and BioReliance performed testing under all GLP guidelines. The details of GLP compliance and training are addressed in **Section 11**.

##### *Spirit of GLP*

The SMT determined a definition for “spirit of GLP” and provided the following verbiage to the laboratories:

*“Laboratories that are non GLP-compliant shall adhere to GLP principles and other method parameters as put forth in this Statement of Work and the Test Method Protocols (provided by NIEHS/NICEATM); documentation and accountability shall be equal to GLP requirements; laboratories must make assurances that they are equal in performance criteria and that there is parity amongst the laboratories.”*

FAL performed testing in the “spirit of GLP” (see **Section 11.2.2**) by following the international GLP standards referenced in the ECVAM Workshop 37 Report (Cooper-Hannan 1999) and the OECD Principles of GLP (OECD 1998). The laboratory did not have data and test method procedures reviewed by an independent quality assurance (QA) auditor. At a minimum, the SOW directed FAL to routinely document the following laboratory tasks (e.g., equipment monitoring) and record keeping (see **Table 8-1**) and to archive the documents. The FAL laboratory already had most of the following procedures and guidelines in place for routine laboratory procedures before initiation of this study. The various general laboratory-related activities were documented in workbooks and logbooks and the information was made available to the SMT.

**Table 8-1 SMT-Recommended Documentation for FAL Laboratory**

Daily	Per Use	Periodic
<u>Temperatures</u> Laboratory, incubators, water baths, refrigerators, freezers	<u>Cryogenic Storage Unit</u> Liquid N <sub>2</sub> volume	<u>Laboratory Supplies</u> <sup>1</sup> Lot numbers and expiration dates for stock media formulations and components, NRU reagents, tissue culture plasticware
<u>Humidity/CO<sub>2</sub></u> Cell culture incubators	<u>Equipment Calibration</u> Balances, pH meters, and cell counters	<u>Cells</u> Quantity and cryogenic storage conditions for 3T3 and NHK cells
<u>Visual Observations</u> Cell Culture Growth	<u>Reagents</u> Lot numbers and expiration dates of medium/supplements	<u>Equipment Calibration</u> Incubators, laminar flow hoods, autoclaves, micropipettors, spectrophotometer plate readers, computers (software)

<sup>1</sup>Periodic documentation for laboratory supplies occurs when supplies are purchased and received in the laboratory



### Good Cell Culture Practices (GCCP)

The SMT provided guidance in the SOW for implementing GLPs in a cell culture laboratory environment. The initial assumption by the SMT was that each laboratory had the basic cell culture skills and knowledge (e.g., as described in Freshney 2000) to perform the NRU cytotoxicity test methods in a reliable manner. Reviews of historical documents and scientific and professional exchanges with the laboratory personnel assured the SMT that each laboratory had demonstrated, through previous validation studies and other scientific endeavors, that personnel were capable of providing quality scientific data through the use of good cell culture practices. A comparison of the SOW and the *in vitro* NRU cytotoxicity protocols to the ECVAM Good Cell Culture Practices (GCCP) Reports (Hartung 2002; Coecke et al. 2005) and the OECD document on GLPs and *in vitro* studies (OECD 2004a) showed that the guidelines in place for the NICEATM/ECVAM study were harmonious with the ECVAM and OECD guidelines.

#### 8.1.2 Quality Assurance (QA) for *In Vitro* NRU Cytotoxicity Test Data

##### *Coded Reference Substances*

BioReliance acquired 73 high purity chemicals (72 reference substances and one positive control chemical at 99% or greater purity when economically feasible) from reputable commercial sources according to the SOW provided by the SMT (see **Appendix G**). Seven reference substances were less than 99% pure (three less than 98% pure; lactic acid had the lowest purity [89%]). The substances were coded with unique identification numbers and provided to the testing laboratories in a blinded fashion. Preparation of substances for distribution was performed under GLP guidelines. **Section 3.6** provides detailed information concerning acquisition and distribution of reference substances.

##### *Solubility Testing and Data Review*

All laboratories performed solubility tests on all reference substances using the solvents and procedures specified by the protocols provided by the SMT and submitted solubility data as hard copy printouts and electronic worksheets. The laboratories also maintained solubility data in their workbooks. The Study Directors reviewed all laboratory procedures and all data produced at their respective laboratories. The QA designee reviewed all data in the GLP-

adherent laboratories. The SMT Project Coordinators served as informal QA reviewers for the FAL (i.e., reviewed all raw data sheets). Detection of errors and omissions were reported to FAL and corrections were requested. The SMT reviewed all solubility data and all NRU assay data produced by all laboratories for this study.

The SMT reviews of submitted data in Phases Ia and Ib revealed that even after data review by the Study Directors, data files contained an unacceptable high frequency of errors (see **Section 2.6.3**). The laboratories were alerted to the problem and personnel from all the laboratories attended a weeklong training session to enhance harmonization among the laboratories. After the training, errors were still found in data files submitted for Phase III, albeit less frequently; such errors generally occurred due to the rapid submission of data files to the SMT shortly after the conclusion of each test. The formal QA review of the files occurred later in each phase of the study.

Errors included typographical mistakes, transcriptional and data entry errors in the Microsoft® EXCEL® and the GraphPad PRISM® 3.0 templates, and incorrect labeling of files. The SMT reviewed every electronic file and hard copy printout throughout the study and alerted the Study Directors when errors were found. All data files were checked for consistency within the documents and for compliance with the protocols. The SMT also documented errors on the hard copy printouts as handwritten notations and included these notations in the electronic data summary files compiled for data management. Files that were revised and/or corrected by the Study Director were resubmitted to the SMT and noted as corrected files.

#### *In Vitro NRU Cytotoxicity Test Tallies*

Periodically, the laboratories received individualized test tallies from NICEATM that detailed:

- the number of range finder tests performed
- the number of definitive tests performed and the pass/fail status of each test
- the number of positive control assays performed and the pass/fail status of each test

- the number of acceptable tests completed per the SMT and protocol requirements
- the status of test completion for each substance (i.e., whether one range finder test and three acceptable definitive tests had been completed for the substance)

The laboratories compared the NICEATM tallies to their own records to verify consistency and accuracy. Discrepancies were resolved through direct communication between the Study Director and the SMT.

#### 8.1.3 Guidelines Followed for *In Vivo* Rodent Oral LD<sub>50</sub> Data Collection

The *in vitro* NRU cytotoxicity test methods are proposed as methods to predict starting doses for acute oral lethality *in vivo* (specifically, rat) assays and not as replacement tests for an *in vivo* reference method. No *in vivo* tests were performed for this validation study. All *in vivo* data (i.e., rodent [rat and mouse] LD<sub>50</sub> values) were collected by NICEATM through reviews of the literature. All data and pertinent information were gathered and stored in a spreadsheet database.

#### *Rodent Acute Oral LD<sub>50</sub> Values Used in the Registry of Cytotoxicity (RC)*

The RC rodent (rat and mouse) acute oral LD<sub>50</sub> values came largely from the 1983/84 RTECS® database (compiled by NIOSH). The RC is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS® and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for chemicals with known molecular weights (Halle 1998). Collection and reporting methods used for generating the data were not a part of any data collection hierarchy employed by the NIOSH. The data in the RTECS® database were not evaluated for quality and accuracy by NIOSH. Many sources of the values come from secondary references with no citation for the original report. GLP guidelines for acute oral toxicity testing were not part of any criteria for determining acceptable data for the database. The only criterion the NIOSH used for reporting acute oral toxicity data in RTECS® was that the LD<sub>50</sub> value was the most toxic LD<sub>50</sub> value for a chemical that could be found in the literature.

### *Rodent Acute Oral LD<sub>50</sub> Values Collected by NICEATM*

One critical aspect of the study design was the establishment of a rat acute oral LD<sub>50</sub> reference value for each of the 72 reference substances (see **Section 4**). These reference values were used to evaluate the extent to which the two *in vitro* test methods can predict rat acute oral LD<sub>50</sub> values. Primary rat acute oral LD<sub>50</sub> studies were located through searching electronic databases, published literature, and secondary references. Rat data were not available for three of the reference substances and, for these, mouse acute oral LD<sub>50</sub> values were collected. Very little data collected from the literature were produced under GLP guidelines; in fact, only seven of the 455 LD<sub>50</sub> values collected were obtained under GLP conditions.

## **8.2 Results of Data Quality Audits**

The QA unit or designee of each GLP laboratory provided a systematic and critical comparison of the data provided in the study report to the raw data in the laboratory records. The SOW provided to each laboratory contained the following guidance on QA statements:

*“The Final Reports for all phases of the Validation Study shall be audited by the Quality Assurance unit of the Testing Facility for GLP compliance and a QA Statement shall be provided by the Testing Facility. Each Final Report shall identify: 1) the phases and data inspected, 2) dates of inspection, and 3) dates findings were reported to the Study Director and Testing Facility management. The QA Statement shall identify whether the methods and results described in the Final Report accurately reflect the raw data produced during the Validation Study.”*

### **8.2.1 QA Statements**

The QA statements from the GLP-compliant laboratories noted the QA reviews of:

- protocols
- laboratory standard operating procedures (SOPs)
- laboratory operations
- 3T3 and NHK NRU experiment data
- final report

The QA statements report that the test methods described in the protocols are the methods that the laboratory personnel used and that the data reported to the SMT is an accurate reflection of the raw data obtained by the laboratory. See **Section 8.2.2** for information about the QA statements for the non-GLP laboratory.

## 8.2.2 QA Statements from the Laboratories

### *BioReliance QA Statements*

The Study Director/Laboratory Director provided the following statement in all of the final reports from BioReliance:

*“The solubility studies, acquisition, preparation, and distribution of the test chemicals were conducted in compliance with GLP. Although not audited (per SOW), the work described in this report for Phase X (i.e., Ia, Ib, and II) fully and accurately reflects to the best of my knowledge the raw data generated in the study.”*

### *FAL QA Statements*

The Study Director for the FAL laboratory performed the final review of all data and reports before sending to the SMT and provided two statements in the final reports (provided to the SMT).

- *“The laboratory worked under the principles of GLP whilst not being a GLP-compliant laboratory.”*
- *“The report accurately reflects the work undertaken and the results obtained at the FRAME Alternatives Laboratory.”*

Since the SMT performed QA reviews of the FAL as an informal reviewer, formal QA statements were not provided to FAL.

### *ECBC QA Statements*

The QA statements reported what particular study phase and which laboratory procedures were examined for compliance with GLP guidelines. In addition, the statement reiterated that the scope of work, associated protocols, and quality control acceptance criteria were

updated/changed during the study which made it more difficult to assess the procedures and data for conformance to the protocols. However, during the review of SOPs and the observance of operations, the requirements and intent of GLP guidelines were continually assessed. The QA reviews found the ECBC protocols to be in compliance with the NICEATM/ECVAM study protocols. The phases of the studies inspected by the QA designee were as follows:

- review of protocols and laboratory SOPs
- review of waste handling
- review of laboratory operations
- certification of new personnel
- review of data
- review of the final report for each phase

The QA designee also observed preparation of reference substances, 96-well plate configuration, application of reference substance, annotation to the workbook, and appropriate sterile technique while performing the testing. The number of inspections of laboratory operations were reduced in the latter phases of the validation study since the same personnel conducted the testing throughout the entire study.

#### ECBC Review Dates of Various Aspects of the Study

- Phase Ia: July 2002 through May 2003
- Phase Ib: July 2002 through January 2003
- Phase II: May 2003 through February 2004
- Phase III: November 2003 through March 2005

#### *IIVS QA Statements*

Because the IIVS QA unit is small, it carried out reviews in phases. The IIVS QA Statement reads:

“This study has been divided into a series of in-process phases. Using a random sampling approach, Quality Assurance monitors each of these phases over a series of studies. Procedures, documentation, equipment records, etc., are examined to assure

that the study is performed in accordance with the U.S. FDA Good Laboratory Practice regulations (21 CFR 58), the U.S. EPA GLP Standards (40 CFR 792 and 40 CFR 160) and the OECD Principles of Good Laboratory Practice and to assure that the study is conducted according to the protocol and relevant Standard Operating Procedures.”

The phases of the studies inspected by the QA designee were as follows:

- protocol and initial paperwork
- reading of the plates (definitive assay)
- dilution of the test articles (definitive assay)
- termination of treatment and addition of the NR dye (definitive assay)
- cell concentration determination and seeding of the plates (third definitive)
- termination of treatment and addition of the NR dye
- washing the cells
- treatment of the cells
- draft report and data
- final report

#### IIVS Review Dates of Various Aspects of the Study

- |                                    |                                   |
|------------------------------------|-----------------------------------|
| • Phase Ia: August 2002            | Final Report Review: October 2005 |
| • Phase Ib: January 2003           | Final Report Review: October 2005 |
| • Phase II: July-August 2003       | Final Report Review: October 2005 |
| • Phase III: January-November 2004 | Final Report Review: October 2005 |

#### *Other QA Information*

Data generated by the laboratories and reviewed by their respective Study Directors were provided directly to the SMT. Often, the data were provided electronically within days of the end of testing. The SMT was very active as a secondary QA reviewer concerning all information provided by the Study Directors. If the SMT found discrepancies, then the Project Coordinators corresponded with the appropriate Study Director to rectify the mistake.

The Study Director made corrections/adjustments to any discrepancies in data reporting and presented any changes to the SMT. The SMT did not initiate any external data quality audits.

The quality of the reference substances was assured in the form of certificates of analysis provided by the chemical manufacturer to BioReliance at the time of purchase. The SMT and the laboratories obtained certificates of analysis from CAMBREX specifically for Clonetics® NHK culture medium and supplements. In addition, the SMT obtained quality control data directly from CAMBREX technical departments for determining the NHK medium's ability to support keratinocyte growth.

### **8.3 Impact of Deviations from GLPs/Non-compliance**

Several error rates were determined by the SMT in regard to documentation, testing methods, and data manipulation by the laboratories. Many errors (particularly in Phases Ia and Ib) were minor mistakes (e.g., typographical, mislabeling) and did not affect the quality of the data.

#### **8.3.1 Laboratory Error Rates**

During Phases Ia and Ib, the SMT was concerned about the number of errors in documentation and testing methods and compiled the number of detected errors from each laboratory. The types of errors noted and compiled included errors in documentation (e.g., reference substance identification did not match on all associated data sheets, IC<sub>20</sub> and IC<sub>80</sub> values were switched in the EXCEL® template, a test acceptance criterion flag in data sheet was incorrect, etc.) and in testing (e.g., wrong dilution scheme was used for the PC, wrong SLS IC<sub>50</sub> was used as the PC IC<sub>50</sub>, etc.). Error rates were compiled as number of tests with errors per total number of tests. As shown in **Table 2-3**, FAL had the highest error rates: 93% for the 3T3 assay and 41% for the NHK assay. The highest error rates of the other laboratories were 10% for the 3T3 assay and 23% for the NHK assay (both ECBC).

There were very few errors detected in the Phase III data files. The SMT did not compile typographical and transcriptional errors but reported the errors directly to the appropriate



Study Director so that the data sheets could be immediately rectified. The SMT did not detect errors in the raw optical density data from the 96-well plates provided in each data file. The laboratories and the SMT corrected any typographical and transcriptional errors (e.g., incorrect logIC<sub>50</sub> value entered) in the EXCEL<sup>®</sup> templates. The template formulas calculated the correct values for the statistical analyses and the quality of the data was not compromised.

For Phase III, assessment of error rates was performed specifically for Phase III for one particular clerical error – the transfer of statistical results (e.g., IC<sub>x</sub> values) from the GraphPad PRISM<sup>®</sup> 3.0 template to the Microsoft<sup>®</sup> EXCEL<sup>®</sup> template. It was often necessary for the SMT to revise the Microsoft<sup>®</sup> EXCEL<sup>®</sup> data files provided by the laboratories because the incorrect values had been transferred to the template. The SMT revised files (using the data in the PRISM<sup>®</sup> 3.0 template) due to this error and reports as follows as the number of errors/total number of definitive tests:

**Table 8-2 Error Rates**

Laboratory	Number of Errors Detected <sup>1</sup>	Number of Definitive Tests	Percentage of Tests with Detected Errors
ECBC	49	402	12
FAL	171	513	33
IIVS	25	419	6

<sup>1</sup> Clerical error – transfer of statistical results from PRISM<sup>®</sup> to EXCEL<sup>®</sup>

### 8.3.2 Test Failure Rates for Definitive Tests and PC Tests

**Table 8-3** illustrates the test failure rates experienced for Phase III of the validation study. Approximately 25% of all 3T3 definitive tests and 18% of all NHK definitive tests failed (i.e., did not meet test acceptance criteria). If a definitive test (see **Section 2.2.2** for the definition of a definitive test) failed, then the laboratory repeated the test and attempted to reach the goal of three acceptable definitive tests for each reference substance and each cell type (see **Section 2.5** for criteria for repeating tests). PC failure occurred 0 – 18% of the time with an overall average failure rate of 8% combined for both assays. FAL had the highest individual laboratory test failure rates for 3T3 definitive tests (30%), NHK definitive tests (32%), and NHK PC tests (18%). ECBC had the highest failure rate for 3T3 PC tests (11%).

Phase III guidelines called for each laboratory to provide three acceptable definitive tests for each substance for both cell types ( $3 \times 60 \times 2 = 360$  definitive tests). PC tests were run concurrently with the definitive tests and generally more than one reference substance was tested in conjunction with one PC test plate. Due to test failures, each laboratory performed additional testing to attempt to obtain the three acceptable definitive tests requested for each substance.

**Table 8-3 Definitive Test and Positive Control (PC) Test Failure Rates**

Test Type	3T3 NRU Test Method				NHK NRU Test Method				Total
	ECBC	FAL	IIVS	Total	ECBC	FAL	IIVS	Total	
Definitive Tests - Acceptable	169	177	176	522	173	175	174	522	1044
Definitive Tests - Total	215	257	225	697	187	256	194	637	1334
% Definitive Tests Failed	21	30	22	25	8	32	10	18	22
PC Tests - Acceptable	66	40	16	122	58	37	20	115	237
PC Tests - Total	74	42	17	133	59	45	20	124	257
% PC Tests Failed	11	5	6	8	2	18	0	7	8
Definitive Tests Failed Only Because PC Tests Failed	14	6	14	34	0	22	0	22	56
% Definitive Tests Failed Only Because PC Tests Failed	7	2	6	5	0	9	0	4	4

**Table 8-4** illustrates the success rates of the testing for each laboratory and for the combined laboratories.

**Table 8-4 Definitive Test and PC Test Success Rates for 3T3 and NHK NRU Test Methods (Combined Total Tests)**

Test Type	ECBC	FAL	IIVS	Total
Acceptable Definitive Tests/ Total Definitive Tests	342/402	352/513	350/419	1044/1334
% Acceptable Definitive Tests	85%	69%	84%	78%
Acceptable PC Tests/Total PC Tests	124/133	77/87	36/37	237/257
% Acceptable PC Tests	93%	89%	97%	92%

### 8.3.3 Intralaboratory Reproducibility

CV values for each reference substance were determined for each laboratory using the IC<sub>50</sub> values from the acceptable definitive tests as described in **Section 5.3.1. Table 8-5** illustrates the average CV values for the substances tested in each of the phases and for the entire study.

**Table 8-5 Coefficients of Variation**

Cell Type	Labs	Phases I & II		Phase III		All Phases	
		Number of Reference Substances	Average % CV	Number of Reference Substances	Average % CV	Number of Reference Substances	Average % CV
3T3	ECBC	12	17	57	24	69	23
	FAL	11	28	55	33	66	33
	IIVS	11	20	56	22	68	21
NHK	ECBC	12	24	57	22	69	23
	FAL	12	31	57	45	69	42
	IIVS	12	14	58	14	70	14

### 8.3.4 Globally Harmonized System Toxicity Category Predictions

Predicted LD<sub>50</sub> values were compared to the GHS *in vivo* acute oral toxicity categories to determine category match (i.e., accuracy) or toxicity underprediction or overprediction for the reference substances (see **Table 8-6**). Predicted LD<sub>50</sub> values were determined for the reference substances by using the mean IC<sub>50</sub> values from the laboratories in the RC regression. The reference GHS *in vivo* acute oral toxicity category presented in **Table 8-6**

was the initial LD<sub>50</sub> value used to select the substances (see **Table 3-1**). The laboratories were generally in agreement with each other in the predictions. Although FAL had the highest error rates and CV values, their predictions of GHS toxicity category using these NRU methods were consistent with the other laboratories. (See **Appendix J** for additional laboratory comparisons for the other *in vitro* – *in vivo* regressions evaluated in **Section 6**.)

**Table 8-6 GHS Toxicity Category Predictions by Laboratory<sup>1</sup>**

	Labs	Total Reference Substances	Category Match	Toxicity Overpredicted	Toxicity Underpredicted
<b>3T3</b>	ECBC	69	29%	41%	30%
	FAL	67	28%	43%	28%
	IIVS	69	28%	41%	32%
<b>NHK</b>	ECBC	69	28%	42%	30%
	FAL	69	28%	41%	32%
	IIVS	70	29%	40%	31%

<sup>1</sup>GHS-Globally Harmonized System categories of acute oral toxicity with LD<sub>50</sub> in mg/kg (UN 2003). 3T3 and NHK NRU test method IC<sub>50</sub> data (geometric mean of within laboratory replicates) used with the RC regression:  $\log(\text{LD}_{50} \text{ mmol/kg}) = 0.425 \times \log(\text{IC}_{50} \text{ mM}) + 0.625$ .

#### 8.4 Availability of Laboratory Notebooks

All laboratories maintained laboratory notebooks patterned after a template provided by IIVS and provided copies of them to the SMT (archived at NICEATM) after each phase. The workbooks contained information from all aspects of testing including but not limited to:

- environmental conditions
- reagent identification
- preparation of 96-well plates
- preparation of reference substances
- treatment of cell cultures
- visual observations of cell cultures
- NRU assays
- data analysis

## 8.5 Summary

- Various determinations of test method and data collection errors consistently showed that FAL had the highest error level; however, the laboratory's GHS acute oral toxicity category predictions were comparable to the other laboratories' results. Data were not adversely affected by general transcriptional errors.
- The laboratories reported no significant deviations from the test method protocols and deviations that did occur during the testing phases were generally quickly acknowledged and addressed by the Study Directors. If a deviation occurred that would affect data (e.g., improper concentration of DMSO solvent), then that Study Director would reject the test, notify the SMT, and perform an additional test. Improper transfer of data to either the EXCEL<sup>®</sup> or PRISM<sup>®</sup> templates, which would affect the data, were recognized, documented, and rectified by the Study Director and/or the SMT.
- The SMT was diligent in reviewing all data sheets to ensure that data were not inadvertently attributed to the incorrect data summary files and that the correct data were used in all statistical analyses.

An electronic copy of all data for this validation study can be obtained upon request from NICEATM.

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## 9.0 OTHER SCIENTIFIC REPORTS AND REVIEWS OF *IN VITRO* CYTOTOXICITY TEST METHODS AND THE ABILITY OF THESE TEST METHODS TO PREDICT ACUTE SYSTEMIC TOXICITY

*In vitro* cytotoxicity test methods based on NRU have been evaluated for a number of uses.

This section reviews studies relevant to:

- the prediction of acute rodent systemic toxicity using *in vitro* NRU cytotoxicity test methods
- the use of *in vitro* cytotoxicity test methods to predict starting doses for acute systemic toxicity tests, and
- the use of *in vitro* NRU cytotoxicity test methods to predict other *in vivo* endpoints.

**Section 9.1** discusses *in vitro* studies that evaluated cytotoxicity using NRU for correlation with acute systemic toxicity in rodents and with other *in vivo* endpoints. Also reviewed are studies that have evaluated the use of *in vitro* cytotoxicity results to reduce animal use in acute toxicity testing. **Section 9.2** reviews independent evaluations of the use of *in vitro* cytotoxicity methods to determine starting doses for acute systemic toxicity assays and a validated NRU test method similar to that used in the current study. The conclusions of these reports will be compared to the conclusions reached in this study where possible. **Section 9.3** reviews studies that have used the *Guidance Document* approach (ICCVAM 2001b), which establishes the current test method performance standard.

### 9.1 Relevant Studies

#### 9.1.1 Correlation of *In Vitro* NRU Cytotoxicity Results with Rodent Lethality

This section reviews *in vitro* cytotoxicity studies that have used NRU methods to predict rodent lethality. *Italics* identify chemicals tested in the reviewed studies that were also tested in the NICEATM/ECVAM validation study reviewed in this BRD.

74 *Peloux et al. (1992)*

75 Using several different *in vitro* cytotoxicity test methods with primary rat hepatocytes,  
76 Peloux et al. (1992) determined the correlation with rat/mouse intraperitoneal (ip) or  
77 intravenous (iv) LD<sub>50</sub> values for the 25 chemicals tested. The *in vitro* cytotoxicity test  
78 methods, which used a 20-hour chemical exposure duration, assessed the following  
79 endpoints: NRU; total protein content, lactate dehydrogenase (LDH) release, tetrazolium salt  
80 MTT reduction. [NOTE: MTT is metabolized by mitochondrial succinate dehydrogenase of  
81 proliferating cells to yield a purple formazan reaction product.] The IC<sub>50</sub> values obtained  
82 using the four endpoints were highly correlated ( $r = 0.973-0.999$ ) to one another. For the  
83 IC<sub>50</sub>-LD<sub>50</sub> regressions, Peloux et al. (1992) used the lowest reported LD<sub>50</sub> value published for  
84 rat or mouse studies that administered the test substances acutely using the ip or iv routes.  
85 The regressions used units of  $\ln \mu\text{g/mL}$  for the IC<sub>50</sub> and  $\ln \text{mg/kg}$  for the LD<sub>50</sub>. The IC<sub>50</sub>  
86 values obtained using NRU had the highest correlation coefficient,  $r = 0.877$ , to the to  
87 rat/mouse ip/iv LD<sub>50</sub> values. The total protein assay yielded  $r = 0.872$ , the MTT reduction  
88 assay yielded  $r = 0.808$ , and the LDH release assay yielded  $r = 0.789$ .

90 *Fautrel et al. (1993)*

91 Six laboratories tested the cytotoxicity of 31 chemicals in primary rat hepatocytes using a 24-  
92 hour exposure followed by measuring NRU. The investigators performed linear regression  
93 analyses for the prediction of rat iv, ip, and oral LD<sub>50</sub> values by the NRU IC<sub>50</sub> values. The  
94 regressions by the various *in vivo* administration routes did not use the same chemicals since  
95 LD<sub>50</sub> values for all the routes were not available for all the tested chemicals. Oral, iv, and ip  
96 LD<sub>50</sub> values were available for 27, 24, and 18 chemicals, respectively. IC<sub>50</sub> values were  
97 obtained for 15, 14, and 11 of the chemicals, respectively. The units used for correlation  
98 were  $\ln \mu\text{g/mL}$  for the IC<sub>50</sub> and  $\ln \text{mg/kg}$  for the LD<sub>50</sub>. While the regression for the iv data  
99 was statistically significant ( $r = 0.88$ ,  $n=11$ ), the ip ( $r=0.48$ ,  $n=14$ ) and oral regressions  
100 ( $r=0.17$ ,  $n=15$ ) were not. The fact that the parenteral LD<sub>50</sub> values correspond more closely  
101 with *in vitro* cytotoxicity data than do the oral LD<sub>50</sub> was thought to be due to the fact that  
102 there are fewer kinetic variables (i.e., absorption, distribution, etc.) to consider for iv  
103 administration. The authors concluded that the hepatocyte cultures were useful in screening  
104 chemical classes with high bioavailability.

Roguet et al. (1993)

Roguet et al. (1993) tested the cytotoxicity of 28 MEIC chemicals in primary rat hepatocytes exposed to the chemicals for 21 hours, followed by measuring NRU. A correlation of the NRU IC<sub>50</sub> values to LD<sub>50</sub> values obtained from the unpublished data of B Ekwall et al. yielded a statistically significant linear correlation ( $p < 0.001$ ) with  $r = 0.80$ . [NOTE: The LD<sub>50</sub> values subsequently published by Ekwall et al. (1998) were from the 1997 edition of RTECS®.] The correlation used molar units for the *in vivo* and *in vitro* data. Roguet et al. (1993) reported that the toxicities of thioridazine, malathion, and *copper sulfate* were overestimated and the toxicity of *potassium cyanide* was underestimated, but their criterion for over/under estimation was not provided. The toxicity of *potassium cyanide* was also underpredicted (see **Appendix L-2**) when using the Registry of Cytotoxicity (RC) rat only weight regression (i.e.,  $\log LD_{50} = 0.372 \log IC_{50} + 2.024$ ) prediction of GHS toxicity categories by the NICEATM/ECVAM 3T3 and NHK NRU test methods. The RC is a database of acute oral LD<sub>50</sub> values for rats and mice obtained from RTECS® and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for chemicals with known molecular weights (Halle 1998).

Rasmussen (1999)

Twenty MEIC chemicals were tested for cytotoxicity in 3T3 cells using NRU with and without the addition of Arochlor-induced rat liver microsomes (S9 mix). The chemical exposure duration was 24 hours. Similar to the present validation study, Rasmussen (1999) was unable to attain cytotoxicity with *xylene*, although it was dissolved in ethanol instead of DMSO. In the presence of S9, the cytotoxicities of malathion, 2,4-dichlorophenoxyacetic acid, *propranolol*, thioridazine, *lithium sulfate*, *copper sulfate*, and *thallium sulfate* were significantly decreased ( $p < 0.05$ ) while the cytotoxicities of *1,1,1-trichloroethane*, *phenol*, *nicotine*, and *paraquat* were significantly increased ( $p < 0.05$ ).

The toxicities of *nicotine*, *thallium sulfate*, and *paraquat* were also underpredicted in the NICEATM/ECVAM validation study (see **Appendix L-2**) when using the RC rat only

weight regression (i.e.,  $\log LD_{50} = 0.372 \log IC_{50} + 2.024$ ) prediction of GHS toxicity categories by 3T3 and NHK NRU test methods.

Although both  $IC_{20}$  and  $IC_{50}$  values were determined in the Rasmussen (1999) study, only the  $IC_{20}$  values were used for correlations with rat acute oral  $LD_{50}$  values from RTECS®. Even though the units of the  $LD_{50}$  values were not reported, the correlations are assumed to be in molar units since the  $IC_{20}$  and  $IC_{50}$  values were reported in  $\mu M$  units. Significant linear correlations ( $p < 0.001$ ) for  $IC_{20}$  and  $LD_{50}$  values were obtained with and without microsomes. The correlation was slightly higher with microsomal activation ( $r = 0.72$  vs. 0.68 for oral and 0.82 vs. 0.78 for ip).

Although the presence of S9 increased the cytotoxicity of some chemicals, it decreased the toxicity of others, and yielded only a small improvement in the correlation to *in vivo* data.

*Creppy et al. 2004*

Creppy et al. (2004) used a 48-hour NRU assay to determine the cytotoxicity of ochratoxin A (OTA) and fumonisin B1 (FB1) on C6 glioma (rat brain), Caco-2 (human intestinal), and Vero (green monkey kidney) cells. The  $IC_{50}$  determined in the NRU assay was used in the RC regression to predict the acute oral  $LD_{50}$ . The predicted  $LD_{50}$  using the C6 glioma cells was similar to mouse  $LD_{50}$  values (data generated from four *in vivo* studies), but the  $LD_{50}$  values predicted by the other cell lines were about 50 times greater than that predicted by the C6 glioma cells. The authors found the relative insensitivity of the Vero cells surprising since OTA was known to be a kidney toxin. There were no  $LD_{50}$  values with which to compare the predicted  $LD_{50}$  of FB1.

#### 9.1.2 Use of Cytotoxicity Data to Reduce the Use of Animals in Acute Toxicity Testing

*Halle et al. (1997): Animal Savings Using Cytotoxicity Data with the ATC*

This study predicted the animal savings that would be produced by using  $IC_{50}$  data from cytotoxicity tests in the RC regression to determine a starting dose for ATC testing. No cytotoxicity testing was performed for this study. The authors used the  $IC_{50x}$  data from the RC and the RC regression to predict the  $LD_{50}$  for the 347 RC chemicals. At the time of the

Halle et al. (1997) study, the ATC (1996 version from OECD) was designed to classify chemicals using the three classes of acute oral toxicity and an unclassified group defined by the acute oral toxicity classification system of the European Union (EU) (see **Table 9-1**). Thus, the fixed doses for the ATC testing were 25, 200, and 2000 mg/kg.

**Table 9-1 EU<sup>1</sup> Classes of Acute Oral Toxicity**

Category	LD <sub>50</sub> (mg/kg)
1	LD <sub>50</sub> ≤ 25
2	25 < LD <sub>50</sub> ≤ 200
3	200 < LD <sub>50</sub> ≤ 2000
Unclassified	LD <sub>50</sub> > 2000

<sup>1</sup>Anon (1993)

Halle et al. (1997) used the RC predicted LD<sub>50</sub> for the 347 RC chemicals as a starting point to estimate the number of ATC dose steps (and animals required) that would be needed to classify the chemicals in the same EU category associated with *in vivo* LD<sub>50</sub> (i.e., oral rat or mouse values from RTECS®). The method required the simulated ATC testing for each chemical to start at the nearest fixed ATC dose to the LD<sub>50</sub> predicted by the RC. The outcome of the simulated testing of three animals per fixed dose was determined by the *in vivo* LD<sub>50</sub>. If the test dose was lower than the *in vivo* LD<sub>50</sub>, animals were assumed to live and, if the test dose was higher than the LD<sub>50</sub>, the animals were assumed to die. Testing of the chemical would proceed with higher (when the animals lived) or lower fixed doses (when the animals died) until the chemical was placed into the EU toxicity category indicated by the *in vivo* rodent oral LD<sub>50</sub>.

The method of Halle et al. (1997) can be illustrated with digoxin, which has an *in vivo* rodent LD<sub>50</sub> of 18 mg/kg (from RTECS®) and an RC predicted LD<sub>50</sub> of 414 mg/kg. Simulated ATC testing would start at the nearest fixed dose, 200 mg/kg, to the RC predicted LD<sub>50</sub> of 414 mg/kg. The three animals tested would die, and three more animals would be tested at 25 mg/kg. The animals tested at 25 mg/kg would die and digoxin would be classified in category 1 for LD<sub>50</sub> ≤ 25 mg/kg. Thus, classification of digoxin required six animals.

Using such simulations of ATC testing for the 347 RC substances, Halle et al. (1997) estimated a total of 2139 test animals would be used:

- 328 substances would require testing with two doses with three test animals each
- 19 substances would require testing with three doses with three animals each

Halle et al. cited (from Schlede et al. 1995) that the average number of animals required to classify chemicals using the ATC method was 9.11. Using this average, ATC testing of the 347 RC chemicals would require 3161 animals. Thus, there would be a 32% reduction in the number of test animals used (compared to the average) when the RC LD<sub>50</sub> prediction was used in conjunction with the 1996 version of the ATC method (Halle et al. 1997).

Depending on the regression evaluated, the average animal savings for the ATC predicted in the NICEATM/ECVAM validation study at dose-response slopes of 2 and 8.3 were 8.0 – 14.8% (0.85-1.56 animals) for the 3T3 NRU and 8.9 -13.5% (0.97-1.43 animals) for the NHK NRU for the 72 reference substances tested (see **Section 10.3**). This is quite a bit lower than the average savings of 32% calculated by Halle et al. (1997). However, there were a number of differences between the evaluation performed by the Halle et al. (1997) and the NICEATM/ECVAM study that contribute to the difference in calculated animal savings:

- the NICEATM/ECVAM study used *in vitro* cytotoxicity data to estimate starting doses (using several regressions based on the RC data)
- the chemicals tested in the NICEATM/ECVAM study were different from the RC chemicals (i.e., the 58 RC chemicals tested had a regression significantly different from the RC regression [see **Section 6.1.2**])
- the NICEATM/ECVAM study used computer simulations of ATC testing, which incorporated assumptions about mortality distributions, to determine animals used whereas Halle et al. (1997) used simplified assumptions (i.e., animals live when test dose is less than LD<sub>50</sub> and die when test dose is greater than LD<sub>50</sub>)
- the NICEATM/ECVAM study determined animal savings by comparing animal use with starting doses determined by the *in vitro* data to animals used at the

default starting dose of 300 mg/kg. Halle et al. (1997) used the average animal use for the ATC as a comparison to animal use with simulated testing..

- the NICEATM/ECVAM study used the GHS acute toxicity categories for classification whereas Halle et al. (1997) used the EU toxicity classification scheme, which had fewer toxicity categories (i.e., accuracy of category prediction by any method would be higher with fewer categories).

*Spielmann et al. (1999): Animal Savings Using Cytotoxicity Data with the UDP*

Spielmann et al. (1999) recommended an *in vitro* cytotoxicity procedure for reducing the number of animals used in acute toxicity tests. The procedure used *in vitro* cytotoxicity data as a range finding test for the *in vivo* toxicity test.

The authors identified nine chemicals in common when comparing the RC database to an evaluation of acute toxicity methods by Lipnick et al. (1995). Spielmann et al. (1999) compared the LD<sub>50</sub> values from Lipnick et al. (1995) to LD<sub>50</sub> predictions calculated when using the RC IC<sub>50</sub> values in the RC regression formula. For seven of the nine chemicals, the LD<sub>50</sub> prediction was within an order of magnitude of the conventional LD<sub>50</sub> (OECD 1987) used in Lipnick et al. (1995). Spielmann et al. (1999) concluded that the RC provides an adequate prediction of LD<sub>50</sub> and that cytotoxicity data could be used to predict starting doses for the UDP. If an IC<sub>50</sub> is available for a particular chemical, the authors recommend using the IC<sub>50</sub>, with the RC regression, to calculate a starting dose (i.e., estimated LD<sub>50</sub>) for the UDP, FDP, or ATC method.

If no IC<sub>50</sub> is available for a particular chemical, Spielmann et al. (1997) recommended determining cytotoxicity using a standard cell line and specific endpoint of cytotoxicity (e.g., NRU, total protein, MTT reduction, etc.). To show that the *in vitro* cytotoxicity test methods provide results that are consistent with the RC, Spielmann et al. (1999) recommended testing 10-20 RC chemicals. The IC<sub>50</sub> data are then used to calculate a new regression, which is then compared to the RC regression. If the new regression fits into the acceptance interval ( $\pm \log 5$  of the fitted regression line) of the RC regression line, the RC regression is used to predict starting doses for the UDP. If the new regression is parallel to the RC regression, but outside

the  $\pm$  log 5 acceptance interval, Spielmann et al. (1999) recommended using the new regression line for the prediction of the starting dose.

Spielmann et al. (1999) contends that the RC provides a sufficient prediction of LD<sub>50</sub> values from IC<sub>50</sub> values for chemicals that do not require metabolic activation and are not usually toxic (i.e., LD<sub>50</sub> > 200 mg/kg), such as industrial chemicals. The authors acknowledge that the fit of chemicals with LD<sub>50</sub> < 200 mg/kg to the RC regression is not good and attribute the poor fit of these chemicals to the fact that they require metabolic activation for toxicity. They indicated that the prediction of starting doses using cytotoxicity data can be applied to the UDP and ATC methods, but not to the FDP since dosing is not sequential (this contradicted a claim made earlier in the paper that the approach could be used with the FDP). They did not estimate the number of animals that might be saved with this approach, but they did recommend that the approach be validated experimentally using several established cell lines with a limited number of representative chemicals from the RC.

*EPA (2004): U.S. EPA HPV Challenge Program Submission*

PPG Industries, Inc. is the manufacturer of Propanoic acid, 2-hydroxy-, compd. with 3-[2-(dimethylamino)ethyl] 1-(2-ethylhexyl) (4-methyl-1,3-phenylene)bis[carbamate] (1:1) [CAS No. 68227-46-3] and is the sponsor of this compound for the EPA HPV Chemical Challenge Program. The compound is an isolated intermediate and subsequently is used to produce a resin component of paint products. PPG provided the following data on the compound in their submission (<http://www.epa.gov/chemrtk/prop2hyd/c13863rt3.pdf>) to the EPA: physical-chemical, environmental fate and pathway, ecotoxicity, and toxicological. The acute mammalian toxicological data were generated using *in vitro* and *in vivo* test methods.

An *in vitro* NRU cytotoxicity test with BALB/c 3T3 cells was conducted to estimate a starting dose for the *in vivo* acute oral toxicity study using the UDP (OECD 2001a) (see **Appendix M** for the OECD UDP test guideline). Use of *in vitro* methods was intended to minimize the number of animals used for *in vivo* testing. The estimated LD<sub>50</sub> of the compound determined by the NRU assay was 489 mg/kg. The starting dose for the UDP study was set at 175 mg/kg, the first default dose below the estimated LD<sub>50</sub> value. The



starting dose of 175 mg/kg is also the default starting dose, which is used when no information (on which to base a starting dose) is available. A total of fifteen female rats received the compound at 175, 550, or 2000 mg/kg. Five of nine rats treated at 2000 mg/kg died prematurely on Days 2 and 3. At 2000 mg/kg, 2/4 surviving animals had lost up to 25% of their Day 1 body weights by Day 15. The LD<sub>50</sub> for the compound was estimated to be 2000 mg/kg with a 95% confidence interval of 1123-5700 mg/kg. Thus, the *in vitro* NRU cytotoxicity test method overpredicted the toxicity of the compound by estimating a lower LD<sub>50</sub> value than that determined in the acute oral toxicity UDP study. The report authors felt that a greater than predicted number of animals was used for UDP testing since the LD<sub>50</sub> estimated by the 3T3 NRU assay, 489 mg/kg, and, consequently, the starting dose, was much lower than the *in vivo* LD<sub>50</sub> of 2000 mg/kg. However, since the UDP started with the default starting dose of 175 mg/kg, the claim that more animals were used is unfounded, since animal use with the default starting dose is the baseline with which animal use should be compared.

#### 9.1.3 Other Evaluations of 3T3 or NHK NRU Test Methods

This section briefly reviews studies that have evaluated NRU methods for purposes other than the prediction of starting doses for acute oral systemic toxicity assays. NRU test methods using either 3T3 or NHK cells have been evaluated for use as alternatives to the Draize eye irritation test and to predict acute lethality in humans. Except for the 3T3 NRU phototoxicity assay, NRU methods have neither been scientifically validated by an independent review for any of these purposes nor accepted for regulatory use. The use of the 3T3 NRU test method to determine phototoxic potential is addressed in **Section 9.2** since it has been validated.

Based on the method of Borenfreund and Puerner (1985), the *in vitro* NRU test method protocols evaluated in the reviewed studies are similar to those evaluated in the current study. The major difference is that most use a 24-hour chemical exposure duration for the 3T3 assay, while the current 3T3 validation study used a 48-hour exposure duration. The major difference between the NHK NRU test method protocols used in these studies and the

protocol used in the NICEATM/ECVAM study is the change of medium with test chemical application used in the validation study presented in this BRD.

#### *Draize eye irritation*

*Triglia et al. (1989)*

Four laboratories collaborated in an interlaboratory validation study to test the NHK NRU assay from Clonetics® Corporation. The evaluation included intra- and inter-laboratory reproducibility and the ability to predict *in vivo* ocular irritancy. Each laboratory tested 11 surfactant-based test agents and compared the IC<sub>50</sub> values to available *in vivo* Draize ocular irritancy scores.

The authors determined the following performance characteristics when comparing the *in vitro* and *in vivo* data:

- specificity (percentage of non irritants detected) = 93%
- sensitivity (percentage of true irritants detected) = 80%
- predictive values (probability that an unknown agent will be properly classified)
  - positive predictive value = 90%
  - negative predictive value = 87%

The authors concluded there was excellent correlation among the laboratories and good correlation between the *in vitro* NR<sub>50</sub> values (concentration at 50% reduction of NRU compared to controls) and the Draize data (Spearman Rank correlation coefficients between *in vivo* and *in vitro* data for the laboratories ranged from 0.67-0.76). The authors also concluded, however, that the NRU assay could not replace the Draize test but may be an effective screening tool for use in a battery of *in vitro* alternatives.

#### *Sina et al. (1995)*

Sina et al (1995) evaluated the NHK NRU test method along with six other *in vitro* test methods to evaluate whether they could be used as complimentary tests in a battery approach. The NRU data correlated poorly with Draize scores for the 33 pharmaceutical intermediates that were tested. The Spearman correlation coefficient for the NR<sub>50</sub> and

maximum average Draize score (MAS) was -0.10 and the Pearson correlation coefficient was -0.04.

*Brantom et al. (1997)*

This study examined the potential of 10 alternative methods to predict the eye irritation potential of cosmetic ingredients. Four laboratories tested 55 coded substances (23 ingredients and 32 formulations) with the 3T3 NRU test method and used the resulting IC<sub>50</sub> to predict modified maximum average scores (MMAS) for the Draize test.

An endpoint in µg/mL was generated for each test by interpolation from a plot of percentage cell survival versus the test substance concentration. A prediction model (PM) was developed from data of 30 single ingredients (29 surfactants and one chemical not classified by the authors) to equate the IC<sub>50</sub> value to an MMAS.

The interlaboratory CV for the NR<sub>50</sub> values was 37.3 ± 29.8% (7.5 ± 6.8 log transformed). No mean IC<sub>50</sub> value for a single laboratory differed by an order of magnitude from the mean of all the laboratories for each chemical, which the authors interpreted as “no significant outliers”. Correlations of NRU predicted MMAS scores with *in vivo* MMAS scores yielded Pearson’s  $r = 0.25 - 0.32$  (for the four laboratories).

Although the authors concluded the reproducibility was good, the data did not accurately predict the MMAS (i.e., low  $r$  values for *in vitro/in vivo* correlations; underpredicted irritants, overpredicted non-irritants). However, the authors concluded that the 3T3 NRU test method had wide applicability to test 51/55 coded substances according to the limitations in the prediction model (four substances outside of the 95% confidence intervals), but that it was not a stand-alone replacement for the Draize test across the entire irritation scale. None of the substances tested were identified by the authors.

*Harbell et al. (1997)*

This paper reported the results of the evaluation of 12 *in vitro* cytotoxicity assays to predict ocular irritation. Data were voluntarily submitted to the US Interagency Regulatory

Alternatives Group (IRAG), composed of members from CPSC, EPA, and FDA. The NHK NRU test method was one of the tests evaluated by six laboratories testing surfactants and surfactant-containing formulations (the 3T3 NRU was not tested). Two laboratories submitted results for the same test substances, but the other four laboratories submitted data for various sets of chemicals and formulations.

The correlation of results from the two laboratories testing the same substances was  $r = 0.99$ . Correlations between the  $NR_{50}$  data and *in vivo* maximum average score (MAS) ranged from -0.92 to -0.54. The IRAG concluded that the assay was suitable as a screening and adjunct assay to assess eye irritation over the range of toxicities found in personal care and household products. IRAG recommends that its use be limited to water-soluble materials. Although the method was evaluated for surfactants, IRAG recommended that the evaluation continue for its performance in predicting eye irritation for various product classes (e.g., fabric softeners, shampoos). IRAG also recommended that physical form be considered since toxicity of the solution (*in vitro*) does not necessarily predict toxicity of the solid (*in vivo*).

#### *Predicting human lethal blood concentrations*

*Seibert et al. (1992)*

The aim of this single laboratory study was to evaluate various aspects of cellular toxicity in four *in vitro* test systems for relevance and reliability to acute systemic toxicity, in particular, human lethal blood concentrations. The 3T3 NRU test method was one of four methods evaluated with 10 MEIC chemicals.

The authors stated that final conclusions on the relevance of the *in vitro* systems could not be determined when compared to the *in vivo* data. The variations in lethal blood concentrations are unknown and make it difficult to define limits for over/underprediction of *in vivo* toxicity using experimental models. In addition, the ability of *in vitro* toxicity to predict *in vivo* toxicity may strongly depend on toxicokinetic factors.

## **9.2 Independent Scientific Reviews**

This section (9.2) covers independent scientific reviews of the use of *in vitro* cytotoxicity methods for the prediction of acute oral toxicity and reduction of animal use. The conclusions of these reports are compared to the conclusions of the current study. Also discussed is the 3T3 NRU phototoxicity test method that has been validated by ECVAM.

#### 9.2.1 Use of *In Vitro* Cytotoxicity Data for Estimation of Starting Doses for Acute Oral Toxicity Testing

*ICCVAM (2001a): Estimation of Animal Savings Using Cytotoxicity Data with the ATC*

Participants at Workshop 2000 examined the influence of starting dose on animal usage for the ATC method (ICCVAM 2001a, section 2.2.3, pp.12-14). No testing was performed at the Workshop. The participants made inferences from the 1996 version of the ATC method that was based on the EU hazard (i.e., toxicity) classification system in **Table 9-1**. The fixed doses for testing were 25, 200, and 2000 mg/kg. Normally, classification of a substance requires testing three animals in two to four dosing steps (i.e., six to 12 animals). With increasing distance between the true toxicity class and the starting dose, the number of dosing steps increases. They estimated that one to three dosing steps could be avoided if the optimum starting dose could be predicted by *in vitro* cytotoxicity (i.e., three to nine animals saved).

The savings of one to three dosing steps was predicted under ideal conditions. The Workshop 2000 report (ICCVAM 2001a) provides a biometrical analysis at a dose-mortality slope of 2 by W. Diener that shows that the largest animal savings occur for chemicals with very high and very low toxicity. Three animals are needed to classify a chemical in the < 25 mg/kg class if the true LD<sub>50</sub> is 1 mg/kg and 25 mg/kg is the starting dose, but six animals are needed if the test starts from the default starting dose of 200 mg/kg (i.e., animal savings = 33%). For a chemical with a true LD<sub>50</sub> of 10000 mg/kg, 11.3 animals on average are needed using the default starting dose, but only 7.7 animals are needed at the 2000 mg/kg starting dose (i.e., animal savings = 31%). For chemicals with a true LD<sub>50</sub> of 2000 mg/kg, no animals are saved by starting at the 2000 mg/kg dose (compared to starting at the default starting dose of 200 mg/kg).

Although these analyses were performed assuming the 1996 ATC method used starting doses of 25, 200, 2000 mg/kg, Workshop 2000 participants expected that animal savings that would be produced by improving the starting dose would not be significantly different for the current ATC method that uses GHS doses of 5, 50, 300, and 2000 mg/kg (or up to 5000 mg/kg) (OECD 2001c; see **Appendix M** for the current ATC test guideline).

Beyond presenting the biometrical analysis by W. Diener, Workshop 2000 participants did not predict the animal savings when *in vitro* cytotoxicity methods are used to estimate starting doses for the ATC.

The NICEATM/ECVAM study yielded a pattern of animal savings for the ATC that was similar to those discussed at the 2000 Workshop (i.e., animal savings were greater for chemicals with lower or higher LD<sub>50</sub> than the default starting dose; see **Section 10.3**). Depending on the regression evaluated, the average animal savings (for the 72 reference substances tested) predicted by the NICEATM/ECVAM validation study at a dose-response slope of 2 was:

- 12.8-17.1 % (1.22-1.63 animals) for the 3T3 NRU and 7.6-13.0% (0.72-1.23 animals) for the NHK NRU for chemicals in the LD<sub>50</sub> ≤ 5 mg/kg category
- 12.1-16.6 % (1.45-1.98 animals) for the 3T3 NRU and 18.9-23.9% (2.26-2.86 animals) for the NHK NRU for chemicals in the 5 < LD<sub>50</sub> ≤ 50 mg/kg category
- 3.6-4.3 % (0.39-0.47 animals) for the 3T3 NRU and 2.1-2.8% (0.23-0.30 animals) for the NHK NRU for chemicals in the 50 < LD<sub>50</sub> ≤ 300 mg/kg category
- -2.8- -0.2% (-0.24 - -0.02 animals) for the 3T3 NRU and -1%-0.8% (-0.10-0.02 animals) for the NHK NRU for chemicals in the 300 < LD<sub>50</sub> ≤ 2000 mg/kg category
- 1.4-14% (0.16–1.67 animals) for the 3T3 NRU and 3.4%-11.0% (0.38-1.23 animals) for the NHK NRU for chemicals in the 2000 < LD<sub>50</sub> ≤ 5000 mg/kg category
- 16.2-31.1% (1.92-3.70 animals) for the 3T3 NRU and 14.2-29.2% (1.69-3.47 animals) for the NHK NRU for chemicals with LD<sub>50</sub> > 5000 mg/kg

The major differences between the evaluation reviewed by the Workshop 2000 participants and the NICEATM/ECVAM study were:

- the NICEATM/ECVAM study used *in vitro* cytotoxicity data to estimate starting doses (using several regressions based on the RC data), whereas the Workshop 2000 participants used the fixed ATC doses as starting doses
- the NICEATM/ECVAM study used computer simulations of ATC testing for individual chemicals whereas Workshop 2000 participants used an evaluation that provided animal use based on fixed *in vivo* LD<sub>50</sub> values and the fixed ATC doses
- the NICEATM/ECVAM study used the GHS acute toxicity categories for classification whereas the Workshop participants used the EU classification scheme which had fewer toxicity categories (i.e., accuracy of category prediction by any method would be higher with fewer categories)

*ICCVAM (2001a): Estimation of Animal Savings Using Cytotoxicity Data with the UDP*

Workshop 2000 participants examined the effect of starting dose on animal usage in the UDP assay by making inferences from computer simulations of animal use shown in the UDP peer review BRD (ICCVAM 2000). Using the rule that requires testing to stop when four animals have been tested after the first reversal (and no other stopping rules), animal use is relatively insensitive to the slope of the dose-mortality curve. The number of animals required when the starting dose equals the true LD<sub>50</sub> is approximately six. When the starting dose is 1/100 times the true LD<sub>50</sub>, however, approximately nine animals are required. Thus, animal use is 30% less when the starting dose is the true LD<sub>50</sub> compared to a starting dose of 1/100 times the true LD<sub>50</sub> (ICCVAM 2001a, section 2.2.4, pg. 16). When the UDP testing stops based on the likelihood-ratio stopping rule, animal use depends heavily on the slope of the dose-mortality curve. Workshop 2000 participants estimated that 25-40% animals would be saved when the starting dose is equal to the true LD<sub>50</sub> compared to a starting dose of 1/100 times the true LD<sub>50</sub>.

At a slope of 0.5, on average 12.4 animals were predicted to be used when the starting dose is 1/100 times the true LD<sub>50</sub>, but use of an average of 8.7 animals was predicted when the starting dose equals the true LD<sub>50</sub> (30% reduction). At a slope of 8.3, an average of 11 animals were predicted to be used when the starting dose is 1/100 times the true LD<sub>50</sub>, but an average of only six animals are used when the starting dose equals the true LD<sub>50</sub> (46% reduction).

The animal savings predicted by Workshop 2000 participants were 25-40% based on starting at the true LD<sub>50</sub> in comparison to starting at a dose 1/100 times the LD<sub>50</sub> as the starting dose.

Depending on the regression evaluated, the average animal savings predicted in the NICEATM/ECVAM validation study at dose-response slopes of 2 and 8.3 were 6.6 - 13.0% (0.63-1.25 animals) for the 3T3 NRU and 6.7 -12.9% (0.64-1.23 animals) for the NHK NRU for the 72 reference substances tested (see **Section 10.2**). When calculated for the chemicals in each GHS toxicity category, the highest average animal savings at a dose-response slope of 2 was for chemicals in the 2000 < LD<sub>50</sub> ≤ 5000 mg/kg category. Animal savings was predicted to be 22.6-26.2% for the 3T3 NRU and 21.0-26.0% for the NHK NRU, depending upon the regression used. The highest average animal savings at a dose-response slope of 8.3 was for chemicals in the LD<sub>50</sub> > 5000 mg/kg group. Animal savings was predicted to be 26.8-32.0% for the 3T3 NRU and 23.2-30.6% for the NHK NRU, depending upon the regression used.. The major differences between the evaluation performed by the Workshop 2000 participants and the NICEATM/ECVAM study were that:

- the comparison default starting dose used for the NICEATM/ECVAM simulations was 175 mg/kg, rather than 1/100 times the true LD<sub>50</sub> assumed by the Workshop 2000 participants (see **Section 10.2**).
- the NRU IC<sub>50</sub> was used in various regressions of *in vitro* data against *in vivo* data to estimate starting doses. This estimation was not always close to the true LD<sub>50</sub>, which was used by the Workshop 2000 participants. For example, the starting doses predicted by the NICEATM/ECVAM study for phenylthiourea were approximately 800 mg/kg by the 3T3 NRU and approximately 1250 mg/kg by the NHK NRU (see **Appendix N**). The true *in vivo* LD<sub>50</sub> for phenylthiourea



is 3 mg/kg. Workshop 2000 participants used a best case scenario when they assumed that *in vitro* cytotoxicity predicted exactly the true LD<sub>50</sub>.

#### 9.2.2 Validation of 3T3 NRU for Phototoxicity

An NRU assay using 3T3 cells was validated by ECVAM and accepted for regulatory use to detect the phototoxic potential of test substances. The 3T3 NRU test for phototoxicity requires a 60-minute exposure to test chemicals, a 50-minute exposure to ultraviolet (UVA, 315-400 nm) light, and then removal of test chemical (Spielmann et al. 1998). After incubation for another 24 hours in fresh medium, NR medium is added and NRU is measured after a 3-hour incubation. Phototoxic potential is assessed by comparing the differences in cytotoxicity between negative control test plates that have not been exposed to UVA and test plates exposed to UVA.

Two different models, the Photoinhibition Factor (PIF) and the Mean Photo Effect (MPE), for the prediction of *in vivo* phototoxic potential were validated. The accuracy of the models for classifying the phototoxic potential of the 30 chemicals tested in nine laboratories was 88% for the PIF and 92% for the MPE when compared with *in vivo* classifications. Interlaboratory variability for classification (i.e., phototoxic vs. non-phototoxic) was assessed using a bootstrapping approach. For each chemical, classification based on a single experiment was compared to classification based on the mean PIF or mean MPE. Interlaboratory variability for classification was 0-18.8% for PIF and 0-20% for MPE.

The ECVAM Scientific Advisory Committee confirmed the scientific validity of the method in 1997 (ECVAM 1997) and its regulatory acceptance was noted in Annex V of Council Directive 67/548/EEC part B.41 on phototoxicity in 2000. An OECD test guideline, 432, was finalized in 2004 (OECD 2004). The test results from the 3T3 NRU phototoxicity test are used in a tiered testing approach to determine the phototoxic potential of test substances.

Performance of the 3T3 NRU phototoxicity assay could not be compared to the performance of the 3T3 NRU test method used in this validation study since different classification schemes were used (i.e., a two category classification for the phototoxicity vs. a six class

scheme for acute oral toxicity). Measurements of interlaboratory variability also used different techniques and were not comparable to those used for the NICEATM/ECVAM study.

#### *NHK NRU Phototoxicity Assay*

FAL participated in the European Union/European Cosmetic, Toiletry and Perfumery Association (EU/COLIPA) study (30 chemicals using NHK and 3T3 cells) and the ECVAM/COLIPA study (20 chemicals using only NHK cells) (Clothier et al. 1999). The authors showed that the NHK NRU test method could also be used to predict phototoxic potential. The accuracy for predicting *in vivo* results was similar to that of the 3T3 NRU phototoxicity test (see **Table 9-2**). The NHK NRU phototoxicity test uses the same chemical exposure duration (approximately 2 hours) as the 3T3 NRU phototoxicity test, but the duration of culture after UV exposure is 72 hours rather than 24 hours. NRU was measured after a 45-minute incubation with NR.

**Table 9-2      Correct Predictions of *In Vivo* Phototoxicants by the NHK NRU Phototoxicity Assay**

Study	3T3 NRU Phototoxicity Test Method	NHK NRU Phototoxicity Test Method
EU/COLIPA (Spielmann et al. 1998)	29/30 (97%) <sup>1</sup>	28/30 (93%) <sup>1</sup>
ECVAM/COLIPA	NA	18/20 (90%) <sup>1</sup> 19/20 (95%) <sup>2</sup>
Combined Study Data	45/45 (100%) <sup>2</sup>	44/45 (98%) <sup>2</sup>

<sup>1</sup>Mean Photo Effect prediction model

<sup>2</sup>Photoinhibition Factor prediction model

NA – not available

Although the NHK NRU phototoxicity test method achieved good concordance with *in vivo* phototoxicity, it has not been validated for regulatory use.

### **9.3      Studies Using *In Vitro* Cytotoxicity Test Methods with Established Performance Standards**

The *Guidance Document* method of evaluating basal cytotoxicity assays for use in predicting

starting doses for acute oral toxicity assays provides the existing performance standards for the 3T3 and NRU test methods (ICCVAM 2001b).

### 9.3.1 Guidance Document (ICCVAM 2001b)

In addition to instructions for evaluating basal cytotoxicity methods for use in predicting starting doses for acute systemic toxicity assays, the *Guidance Document* provided results from testing 11 reference chemicals (ICCVAM 2001b). The 11 reference chemicals were tested with the 3T3 and NHK NRU test method protocols recommended in the *Guidance Document*. The 11 chemicals were chosen from the RC database so as to have a close fit to the RC  $IC_{50}$  -  $LD_{50}$  regression and to cover a wide range of cytotoxicity. The major differences in the *Guidance Document* protocols and the protocols used in this study are the reduced NR concentrations (from 50  $\mu\text{g/mL}$  to 25  $\mu\text{g/mL}$  in the 3T3 assay and to 33  $\mu\text{g/mL}$  in the NHK assay), the increased chemical exposure duration for the 3T3 test method (from 24 to 48 hours), and the lack of a refeeding step for the NHK test method just prior to chemical application (see **Section 2.2** for further detail). Nevertheless, the *Guidance Document* shows the similarity of the results for the 11 chemicals in both the 3T3 and NHK NRU test methods to the RC data. The regressions were:

- $\log (LD_{50}) = 0.506 (\log IC_{50}) + 0.475$  ( $R^2 = 0.985$ ) for the 3T3 NRU
- $\log (LD_{50}) = 0.498 (\log IC_{50}) + 0.551$  ( $R^2=0.936$ ) for the NHK NRU, and
- $\log (LD_{50}) = 0.435 (\log IC_{50}) + 0.625$  for the RC.

The 3T3 and NHK NRU regressions were graphed on the RC regression (347 chemicals) to show that the regression lines as well as all 11 chemical data points were within the acceptance interval ( $\pm 0.5$  log around the regression) of the RC regression (see **Appendix D-1, Guidance Document, Figures 3 and 4, pg.13**).

### 9.3.2 King and Jones (2003)

This study also tested the 11 chemicals recommend in the *Guidance Document* in the 3T3 NRU test method protocol recommended therein. The  $IC_{50}$  -  $LD_{50}$  regression obtained was comparable to the RC and to the 11 chemical regression provided in the *Guidance Document* (ICCVAM 2001b). The regression was  $\log (LD_{50}) = 0.552 \log IC_{50} + 0.503$  ( $R^2=0.929$ )

while the RC regression was  $\log(\text{LD}_{50}) = 0.435 \log \text{IC}_{50} + 0.625$ . King and Jones (2003) graphed the results to show that the regression fit within the acceptance interval ( $\pm 0.5 \log$  around the regression line) of the RC.

King and Jones (2003) also showed that a 3T3 NRU test method altered for high throughput testing by using a limited dose-response curve of three points yielded about the same  $\text{IC}_{50}$  as an eight concentration dose-response. A regression used to compare the  $\text{IC}_{50}$  values using the two different dose-response approaches yielded  $R^2 = 0.945$ .

### 9.3.3 A-Cute-Tox Project: Optimization and Pre-Validation of an *In Vitro* Test Strategy for Predicting Human Acute Toxicity (Clemedson 2005)

The A-Cute-Tox Project is an Integrated Project under the EU 6<sup>th</sup> framework program that started in January 2005 (termination date January 2010). The project was initiated in response to the the REACH (Registration, Evaluation, Authorisation and Restriction of Chemicals) Directive and the 7<sup>th</sup> amendment of the Cosmetics Directive call for the broad replacement of animal experiments for finished products in 2003 and ingredients in 2009. Dr. Cecilia Clemedson of Expertrådet Environmental Competence Ltd, Sweden, is the scientific coordinator of the project.

The aim of the project is to develop a simple and robust *in vitro* testing strategy for prediction of human acute systemic toxicity, which could replace the animal acute toxicity tests used today for regulatory purposes. The objectives of A-Cute-Tox are:

- Compilation, critical evaluation, and generation of high quality *in vitro* and *in vivo* data for comparative analysis.
- Identifying factors (kinetics, metabolism and organ specificity) that influence the correlation between *in vitro* toxicity (concentration) and *in vivo* toxicity (dosage), and to define an algorithm that accounts for this.
- Explore innovative tools and cellular systems to identify new end-points and strategies to better anticipate animal and human toxicity.
- To design a simple, robust and reliable *in vitro* test strategy amenable for robotic testing, associated with the prediction model for acute toxicity.

The project is an extension of the NICEATM/ECVAM study and the EDIT (Evaluation-guided Development of *In-vitro* Test batteries) program, which is the continuation of the MEIC (Multicentre Evaluation of *In Vitro* Cytotoxicity tests) study. The partnership is made up of the EDIT Consortium, ECVAM, and 35 other European toxicity research group partners. The project has been divided into the following workpackages that will be implemented by various configurations of research partners:

- WP1: Generation of a “high quality” *in vivo* database (through literature searches and historical data) and establishment of a depository list of reference chemicals
- WP2: Generation of a “high quality” *in vitro* database (includes data from the NICEATM/ECVAM study, EDIT studies, and MEIC studies)
- WP3: Iterative amendment of the testing strategy
- WP4: New end-points and new cell systems
- WP5: Alerts and correctors in toxicity screening (I): Role of ADE
- WP6: Alerts and correctors in toxicity screening (II): Role of metabolism
- WP7: Alerts and correctors in toxicity screening (III): Role of Target organ toxicity (neuro-, nephro-, hepato-toxicity)
- WP8: Technical optimisation of the amended test strategy
- WP9: Pre-validation of the test strategy

A-Cute-Tox aims to extend the NICEATM/ECVAM and MEIC studies approach toward a full replacement test strategy by improving the prediction of acute toxicity using *in vitro* methods and validating the testing procedure.

#### 9.4 Summary

- *In vitro* NRU cytotoxicity test methods using various cell types have been evaluated for correlation with rodent lethality endpoints (e.g., rat/mouse iv, ip, and oral toxicity). Peloux et al. (1992) and Fautrel et al. (1993) showed good

correlation ( $r=0.877$  and  $0.88$ , respectively) of *in vitro* cytotoxicity with rodent ip/iv and iv data, respectively.

- The 3T3 and NHK NRU test methods have been used for purposes other than the prediction of starting doses for acute toxicity studies (e.g., ocular irritancy; human lethal blood concentrations, *in vivo* phototoxicity).
- The 3T3 NRU test method has been validated (through ECVAM) for the identification of *in vivo* phototoxic potential.
- No *in vitro* test methods have currently been validated for the prediction of acute oral toxicity. Estimation of animal savings using *in vitro* cytotoxicity data to estimate starting doses for the UDP did not use *in vitro* cytotoxicity data. Instead, animal savings were estimated by assuming that the starting dose equals the true  $LD_{50}$  (i.e., assumes cytotoxicity data can predict lethality perfectly). Such theoretical predictions for animal savings for the UDP ranged from 25-40% (ICCVAM 2001a) compared with the average animal savings of 6.6-13% predicted using computer simulation modeling of the UDP for the chemicals tested in the NICEATM/ECVAM study. Halle et al. (1997) used the *in vitro* cytotoxicity data in the RC to determine that animal savings of 32% can be attained for the ATC method by using the  $LD_{50}$  predicted by the RC regression as the starting dose. For the chemicals tested in the NICEATM/ECVAM validation study, the average animal savings for the ATC, determined by computer simulation modeling, was 8.0-14.8%.

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## 10.0 ANIMAL WELFARE CONSIDERATIONS (REFINEMENT, REDUCTION, AND REPLACEMENT)

As demonstrated in **Section 6**, *in vitro* NRU basal cytotoxicity test methods cannot be used as replacement assays<sup>1</sup> for rodent acute oral toxicity test methods for hazard classification. However, as described in this section, such test methods can be evaluated for their ability to reduce<sup>2</sup> and refine<sup>3</sup> animal use in the UDP or ATC acute oral toxicity assays. A similar analysis cannot be conducted for the FDP as this test method uses evident toxicity rather than death as the endpoint of interest. The current UDP and ATC test guidelines recommend using information on structurally-related substances and the results of any other toxicity tests (EPA 2002b) to select a starting dose (OECD 2001a; EPA 2002a; OECD 2001d). However, for the purposes of the reduction and refinement evaluation conducted in this section, it was assumed that no information other than 3T3 and NHK NRU test data would be available upon which to base the selection of a starting dose. To determine the extent of animal reduction or refinement that would occur in the UDP and the ATC when using a starting dose based on 3T3 or NHK NRU IC<sub>50</sub> results rather than the default starting dose, computer models were used to simulate the *in vivo* testing of the reference substances used in the NICEATM/ECVAM validation study.

**Section 10.1** lists the regressions that were used with IC<sub>50</sub> data from the 3T3 and NHK NRU test methods to determine starting doses for the UDP and ATC test methods. **Sections 10.2.1** and **10.3.1** summarize the animal testing procedures described in the current test guidelines for the UDP and the ATC method, respectively. The procedures for using computer software to simulate animal testing of the NICEATM/ECVAM reference substances are then detailed in **Sections 10.2.2** and **10.3.2**. The computer simulations were used to determine the number of animals used and the number of animals that died for each simulated test. The computer simulation modelling was performed using five different dose-mortality (i.e., dose-response)

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<sup>1</sup> **Replacement alternative:** A new or modified test method that replaces animals with nonanimal systems or one animal species with a phylogenetically lower one (e.g., a mammal with an invertebrate).

<sup>2</sup> **Reduction alternative:** A new or modified test method that reduces the number of animals required.

<sup>3</sup> **Refinement alternative:** A new or modified test method that refines procedures to lessen or eliminate pain or distress in animals or enhances animal well-being.

slopes since no information on dose-mortality slope was available for the substances tested. To simplify the presentation of results, animal use figures provided in **Sections 10.2.3, 10.2.4, 10.3.3, and 10.3.4** include two of the dose-response slopes. The results for the other three dose-response slopes are provided in **Appendices N and Q**. The number of animals used is summarized to show the mean number of animals tested when the default starting dose is used and the mean number of animals used when the NRU-determined starting dose (i.e., from the 3T3 or NHK NRU IC<sub>50</sub> values used in the indicated regressions) is used. The difference in animal use between the default starting doses and the NRU-based starting doses is referred to as the animal savings. Differences were tested for statistical significance (i.e.,  $p < 0.05$ ) using a one-sided Wilcoxon signed ranked test based on the number of substances evaluated. **Sections 10.2 and 10.3** summarize mean animal use by the total number of substances tested and then by the number of substances in each GHS acute oral toxicity category. **Sections 10.2.4 and 10.3.4** provide the mean number of animal deaths compared to the mean number of animals used for each starting dose (i.e., default and NRU-based) to determine whether the NRU-based starting doses result in the refinement of animal use (i.e., reduction in the number of animals that die).

#### **10.1 Use of 3T3 and NHK NRU Test Methods to Predict Starting Doses for Acute Systemic Toxicity Assays**

The IC<sub>50</sub> data from the 3T3 and NHK NRU test methods were used to predict starting doses for acute oral systemic toxicity tests using the following linear regressions of IC<sub>50</sub>-LD<sub>50</sub> values presented in **Section 6.2** (see **Table 6-2**):

- the RC millimole regression [Note: The RC millimole regression was developed from the Registry of Cytotoxicity, a database of rat and mouse oral LD<sub>50</sub> values from RTECS<sup>®</sup> and IC<sub>50</sub> values from *in vitro* cytotoxicity assays using multiple cell lines and cytotoxicity endpoints for 347 chemicals with known molecular weights (Halle 1998).]
- the RC rat-only weight regression
- the RC rat-only weight regression excluding substances with specific mechanisms of toxicity other than basal cytotoxicity

Data for the same reference substances were evaluated for each regression and simulated acute systemic toxicity test method. Forty-six substances were evaluated for the 3T3 NRU test method and 47 substances were evaluated for the NHK NRU test method. Of the 72 substances tested, epinephrine bitartrate, colchicine, and propylparaben were excluded because they were removed from the calculation of the RC rat-only weight regression due to the lack of rat oral reference LD<sub>50</sub> data. The 21 substances with specific mechanisms of toxicity in **Table 6-3** were excluded from all analyses to be consistent with those removed from the RC rat-only weight regression excluding substances with specific mechanisms of toxicity. These substances have known mechanisms of toxicity that are not expected to be active in the 3T3 and NHK cell cultures. Carbon tetrachloride and methanol were excluded from the 3T3 NRU evaluations because no laboratory attained sufficient toxicity in any test for the calculation of an IC<sub>50</sub>. Carbon tetrachloride was also excluded from the NHK NRU evaluations because no laboratory attained sufficient toxicity in any test for the calculation of an IC<sub>50</sub>.

## **10.2 Reduction and Refinement of Animal Use for the UDP**

### **10.2.1 Procedure for *In Vivo* Testing Using the UDP**

This section describes the general dosing procedure for the UDP assay (OECD 2001a; EPA 2002a). Although doses, time between doses, and dose progression may be adjusted as necessary, the procedures described reflect the default guidance. Guidance on the type of animals to use, animal housing, clinical observations, etc., are outside the scope of the current discussion and are provided in the test guidelines (see **Appendix M**).

#### *Main Test*

The UDP is based on a staircase design in which single animals are dosed in sequence at 48-hour intervals. The outcome of the first animal determines the dose of the next animal. If the first animal dies or is in a moribund state, the dose administered to the next animal is lowered by dividing the original dose by one-half log (i.e., 3.2, which is the default dose progression). If the first animal survives, the dose administered to the next animal is increased by one-half log times the original dose. A dose progression of one-half log unit corresponds to a dose-

mortality (also referred to as “dose-response) slope of 2. The default dose progression can be adjusted if the analyst has prior information upon which to estimate a slope.

The current test guidelines recommend using information on structurally-related substances and the results of any other toxicity tests (EPA 2002b) for the test substance, including *in vitro* cytotoxicity results, to approximate the LD<sub>50</sub> and the slope of the dose-response curve (OECD 2001a; EPA 2002a). The starting dose is one dose progression step below the analyst’s best estimate of the LD<sub>50</sub>, since the UDP test method has a bias toward the starting dose (i.e., LD<sub>50</sub> estimate tends to move toward the starting dose). The default starting dose of 175 mg/kg is used if there is no information on which to base a starting dose. The entire default dosing scheme generally uses a dose progression of 3.2, is 1.75, 5.5, 17.5, 55, 175, 550, 1750, and 5000 mg/kg (EPA 2002a) or 1.75, 5.5, 17.5, 55, 175, 550, and 2000 mg/kg (OECD 2001a). Dosing single animals in sequence proceeds until the first of three conditions, referred to as stopping rules, is met:

- three consecutive animals survive at the upper limit (2000 or 5000 mg/kg)
- five reversals occur in any six consecutive animals tested
- four or more animals have followed the first reversal and the specified likelihood-ratios exceed the critical value. For a wide variety of LD<sub>50</sub> values and dose-mortality slopes, this is satisfied with four to six animals after the first reversal. Three likelihood values are calculated: a likelihood at an LD<sub>50</sub> point estimate (called the rough estimate or dose-averaging estimate); a likelihood at a value below the point estimate (the point estimate divided by 2.5); and a likelihood at a value above the point estimate (the point estimate multiplied by 2.5). The ratios of the likelihoods are examined to determine whether they exceed a critical value.

If none of these conditions is met, dosing stops after 15 animals have been used.

#### *Limit Test*

The UDP test method guidelines include a limit test using three to five animals dosed sequentially at 2000 mg/kg or 5000 mg/kg (OECD 2001a; EPA 2002a). The EPA guideline

for testing at a limit dose of 5000 mg/kg calls for proceeding to the main test if the first animal dosed at 5000 mg/kg dies (EPA 2002a). If the first animal lives, however, two more animals are dosed at 5000 mg/kg. If both animals live, then testing is terminated with  $LD_{50} > 5000$  mg/kg. If one or both animals die, then two more animals are dosed in sequence. As soon as three animals survive, the test is terminated with the conclusion that  $LD_{50} > 5000$  mg/kg. However, as soon as three animals die, the main test is conducted. The OECD guideline for testing at a limit dose of 2000 mg/kg calls for proceeding to the main test if the first animal dosed at 2000 mg/kg dies (OECD 2001a). If the animal lives, however, four more animals are sequentially dosed. Whenever three animals die, the main test is performed. If three or more animals survive, testing is terminated with the conclusion that the  $LD_{50} > 2000$  mg/kg.

#### 10.2.2 Procedure for Computer Simulation Modeling of the UDP

Two thousand simulations of UDP testing were run for each substance, *in vitro* NRU test method, and dose-mortality slope. Because the analysis assumed there was no information upon which to estimate a dose-response slope, the simulation modeling used the default dose progression factor of 3.2. The simulations used 5000 mg/kg as the upper limit dose since this upper limit is commonly used in the United States. If the NRU-based starting dose was 4000 mg/kg or greater, then testing proceeded per the limit test rather than the main test. If, during the dose progression, the next highest dose to be administered was within 4000 mg/kg or greater, then the limit dose of 5000 mg/kg was administered. In the case where a dose one step below the NRU-estimated  $LD_{50}$  was used as the starting dose, the other doses administered corresponded to the default doses specified in the test method guidelines (OECD 2001a; EPA 2002a). The simulation modeling procedures also used a lower limit of 1 mg/kg. Thus, if the dose progression fell below 1 mg/kg, then a dose of 1 mg/kg was administered. To estimate animal use by the default method, a starting dose of 175 mg/kg was used; the other doses administered after the default starting dose corresponded to the default doses specified in the test method guidelines (OECD 2001a; EPA 2002a).

The simulation process was performed using SAS<sup>®</sup> version 8 (SAS 1999) and implements the distributional assumptions underlying the dose-mortality relationship. The lowest dose at

which an animal dies in response to the administration of a toxic substance varies from animal to animal. For an entire population of animals, mortality is assumed to have a log-normal distribution with the mean equal to the log of the true LD<sub>50</sub>. Sigma ( $\sigma$ ), the variability of the simulated population, is the inverse of the slope of the dose-mortality curve. Due to a lack of information for the real dose-mortality curves, the simulations assumed several different values of the slope, but no corresponding changes were made in the dose progression. Dose-mortality slopes of 0.5, 0.8, 2, 4, and 8.3 were chosen since these were used in the simulation modeling studies that evaluated the current version of the UDP guidelines (ICCVAM 2001c).

To model the variability of the NRU IC<sub>50</sub> values within and between laboratories, the values were log-transformed to normalize the distribution of values for each substance. The mean and variance of these log-transformed values were used to generate a log-normal distribution from which to randomly select an IC<sub>50</sub> value. The selected NRU IC<sub>50</sub> value was used with the regressions in two different ways to determine starting doses. One method used the LD<sub>50</sub> estimated from the IC<sub>50</sub> and the regression as the starting dose while the other method used the closest default dose lower than the estimated LD<sub>50</sub> as the starting dose. The results from the latter method are presented in **Section 10.2** since it is the method recommended by the EPA and OECD test guidelines (EPA 2002a; OECD 2001a). Moreover, the UDP is only usable for regulatory purposes if the starting dose is set below the expected LD<sub>50</sub>. The results obtained when the LD<sub>50</sub> estimated by the IC<sub>50</sub> and the regression was used as the starting dose are presented in **Appendix Q**.

The simulation procedure used the following steps for each substance:

1. The LD<sub>50</sub> value (in mg/kg) from **Table 4-2** was entered as the true LD<sub>50</sub> value and the choices of assumed slope were entered as the true slope for the dose-mortality curve.
2. An IC<sub>50</sub> value was selected from a distribution identified by the mean and variance of the IC<sub>50</sub> values computed from the data to reflect that different laboratories produce different IC<sub>50</sub> values in different situations (see **Table 5-3** for mean IC<sub>50</sub> values and standard deviations).

3. The  $IC_{50}$  value from Step 2 was used in the regression model being evaluated to compute a predicted  $LD_{50}$  value to use as the starting dose.
4. The dosing simulation was run three times: once with the default starting dose of 175 mg/kg, once at the next default dose below the  $LD_{50}$  estimated by the regression being evaluated, and once at a dose equal to that of the  $LD_{50}$  estimated by the regression being evaluated.
5. For each simulated trial (each substance and starting dose), the dosing simulation works similarly. In each trial, the animals are dosed sequentially; therefore for each animal(i) there is a corresponding dose(i) that is administered to the animal. For the first animal in each trial, it is the starting dose for that trial. For each subsequent animal, the dose is dependent on the previous dose and the previous animal's response as described in **Section 10.2.1**. For animal(i), the probability of response is computed with the cumulative log-normal distribution at the dose administered. That is,  

$$P(response) = P(x < \log[dose(i)])$$
where  $x \sim N(\mu, \sigma)$  and  $\mu$  is the log of the true  $LD_{50}$  value and  $\sigma$  is the inverse of the assumed slope of the dose-mortality curve. This probability is used to sample one observation from a binomial distribution with this probability of success.
6. Dosing simulation is stopped once one of the stopping rules is satisfied.

Steps 2-6 were repeated 2000 times in order to compute an average animal use for each method evaluated.

### 10.2.3 Animal Savings for the UDP When Using 3T3 and NHK NRU-Based Starting Doses

#### 10.2.3.1 *The Effect of Dose-Response Slope on Animal Use*

As described in **Section 10.2.2**, the simulation modeling of animal use for the UDP assumed five different dose-mortality slopes to assess animal use under various conditions of population variability. **Table 10-1** shows that the number of animals used for the UDP decreases with increasing slope for both the default starting dose and the NRU-determined starting dose based on the RC millimole regression. The NRU-determined starting dose was

the next default dose lower than the regression-estimated LD<sub>50</sub>. For example, since the LD<sub>50</sub> predicted for cadmium chloride by the 3T3 NRU IC<sub>50</sub> with the RC millimole regression was 16 mg/kg, the starting dose was 1.75 mg/kg (i.e., the next default dose below the predicted LD<sub>50</sub>). This approach is consistent with the UDP test method guidelines (OECD 2001a; EPA 2002a) as a means for reducing the number of animals that might experience pain and suffering from treatment (i.e., as a test method refinement). The approach also overcomes the nonconservative bias of the UDP, which tends to yield an LD<sub>50</sub> close to the starting dose.

**Table 10-1 Change in Animal Use<sup>1</sup> with Dose-Response Slope for the UDP<sup>2</sup>**

Dose-Response Slope	With Default Starting Dose <sup>1,3</sup>	With NRU-Based Starting Dose <sup>1,4</sup>	Animals Saved <sup>5</sup>
<b>3T3 NRU Test Method</b>			
0.5	10.30 ± 0.13	9.43 ± 0.15	0.88* (8.5%)
0.8	10.34 ± 0.17	9.36 ± 0.18	0.98* (9.4%)
2.0	9.77 ± 0.21	8.79 ± 0.22	0.97* (10.0%)
4.0	8.96 ± 0.25	8.03 ± 0.27	0.93* (10.4%)
8.3	8.11 ± 0.26	7.20 ± 0.30	0.91* (11.2%)
<b>NHK NRU Test Method</b>			
0.5	10.31 ± 0.12	9.57 ± 0.17	0.74* (7.1%)
0.8	10.38 ± 0.16	9.47 ± 0.19	0.91* (8.8%)
2.0	9.75 ± 0.20	8.93 ± 0.23	0.82* (8.4%)
4.0	8.94 ± 0.24	8.14 ± 0.28	0.80* (9.0%)
8.3	8.12 ± 0.25	7.33 ± 0.30	0.79* (9.7%)

<sup>1</sup>Numbers are mean numbers of animals with standard errors for 2000 simulations for 46 substances for the 3T3 NRU test method and 47 substances for the NHK NRU test method. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. The slight differences in the number of animals used for the default starting dose at the same dose-response slope reflect different simulation runs. Limit dose = 5000 mg/kg.

<sup>2</sup>OECD (2001a); EPA (2002a).

<sup>3</sup>Default starting dose = 175 mg/kg.

<sup>4</sup>Starting dose = next lower default dose to NRU-predicted LD<sub>50</sub>, which was calculated using the geometric mean of the laboratory geometric mean NRU IC<sub>50</sub> values in the RC millimole regression:  $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \log \text{IC}_{50} (\text{mM}) + 0.625$ .

<sup>5</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based starting dose. All differences denoted by \* were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test. Percentage difference is shown in parentheses.

**Table 10-1** shows that, for each dose-response slope, the mean number of animals saved was statistically significant (i.e.,  $p < 0.05$ ) when compared to mean animal use for the default



starting dose. When expressed as a percentage of the default animal use, animal savings also generally increased with increasing slope.

To simplify the presentation of animal savings and comparison of the various regressions and starting doses, the results of subsequent analyses presented in **Section 10.2.3** will be limited to slopes of 2 and 8.3. The slope of 2 is the default slope used for the calculation of LD<sub>50</sub> by the UDP method (OECD 2001a; EPA 2002a). Animal savings results for the other dose-mortality slopes are presented in **Appendices N1-N3**. Although using the next lower default dose to the NRU-determined LD<sub>50</sub> value overcomes the bias of the UDP toward the starting dose (OECD 2001a, EPA 2002a) and is the appropriate approach for regulatory use, animal savings results using the estimated LD<sub>50</sub> as the starting dose were also calculated (see **Appendix Q**).

#### 10.2.3.2 Mean Animal Use from UDP Simulations for Testing the NICEATM/ECVAM Reference Substances – Comparison of Regressions and 3T3 and NHK NRU Test Methods

**Table 10-2** shows the mean animal use for simulated UDP of the testing the set of NICEATM/ECVAM reference substances described in **Section 10.1**. Mean animal use is shown for default starting dose and for starting doses that were one default dose lower than the LD<sub>50</sub> predicted from the *in vitro* NRU test methods and the regressions (shown in **Table 6-2**) evaluated in **Section 6.3** for prediction of GHS acute oral toxicity category. The difference in animal use between the two starting doses is the mean animal savings produced by using the starting dose based on the *in vitro* NRU test methods. All differences (i.e., mean animal savings) were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test. Mean animal savings ranged from 0.79 to 1.16 (8.4 to 12.7%) animals depending upon the NRU test method, regression, and dose-response slope. The lowest mean animal savings were obtained for the RC millimole regression (0.82 [8.4%] to 0.97 [10.0%] animals for the various test methods and dose-response slopes) and the highest mean animal savings were obtained with the RC rat-only regression excluding substances with specific mechanisms of toxicity other than basal cytotoxicity (1.00 [12.2%] to 1.16 [11.8%] animals).

**Table 10-2 Mean Animal Use<sup>1</sup> for the UDP<sup>2</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods with Various Regressions**

Assay/Regression	With Default Starting Dose <sup>3</sup>	With NRU-Based Starting Dose <sup>4</sup>	Animals Saved <sup>5</sup>	With Default Starting Dose <sup>3</sup>	With NRU-Based Starting Dose <sup>5</sup>	Animals Saved <sup>5</sup>	Accuracy <sup>6</sup>
<b>3T3 NRU Test Method</b>	<b>Dose-Response Slope = 2</b>			<b>Dose-Response Slope = 8.3</b>			
RC millimole <sup>6</sup>	9.77 ± 0.21	8.79 ± 0.22	0.97* (10.0%)	8.11 ± 0.26	7.20 ± 0.30	0.91* (11.2%)	26%
RC rat-only weight <sup>7</sup>	9.79 ± 0.21	8.66 ± 0.22	1.13* (11.6%)	8.14 ± 0.25	7.11 ± 0.29	1.03* (12.7%)	35%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>8</sup>	9.80 ± 0.20	8.64 ± 0.23	1.16* (11.8%)	8.16 ± 0.25	7.08 ± 0.31	1.08* (13.3%)	46%
<b>NHK NRU Test Method</b>	<b>Dose-Response Slope = 2</b>			<b>Dose-Response Slope = 8.3</b>			
RC millimole <sup>6</sup>	9.75 ± 0.20	8.93 ± 0.23	0.82* (8.4%)	8.12 ± 0.25	7.33 ± 0.30	0.79* (9.7%)	28%
RC rat-only weight <sup>7</sup>	9.77 ± 0.20	8.83 ± 0.23	0.94* (9.6%)	8.13 ± 0.25	7.25 ± 0.30	0.88* (10.9%)	30%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>8</sup>	9.78 ± 0.20	8.73 ± 0.24	1.05* (10.7%)	8.15 ± 0.25	7.15 ± 0.32	1.00* (12.2%)	38%

<sup>1</sup>Numbers are mean numbers of animals and standard errors for 2000 simulations for each of 46 substances for the 3T3 NRU test method and 47 substances for the NHK NRU test method. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. The slight differences in the number of animals used for the default starting dose at the same dose-response slope reflect different simulation runs.

<sup>2</sup>OECD (2001a); EPA (2002a).

<sup>3</sup>Default starting dose = 175 mg/kg.

<sup>4</sup>Starting dose = one default dose lower than the NRU-predicted LD<sub>50</sub> calculated using the geometric mean of the laboratory geometric mean NRU IC<sub>50</sub> values in the specified regression.

<sup>5</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based LD<sub>50</sub>. Differences denoted by \* were statistically significant (i.e., p < 0.05) by a one-sided Wilcoxon signed rank test. Percentage difference is shown in parentheses.

<sup>6</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category (from **Tables 6-4 to 6-6**).

<sup>7</sup>log LD<sub>50</sub> (mmol/kg) = 0.435 log IC<sub>50</sub> (mM) + 0.625.

<sup>8</sup>log LD<sub>50</sub> (mg/kg) = 0.372 log IC<sub>50</sub> (µg/mL) + 2.024.

<sup>9</sup>log LD<sub>50</sub> (mg/kg) = 0.357 log IC<sub>50</sub> (µg/mL) + 2.194.

**Table 10-2** also shows that animal savings increased with the accuracy of the GHS acute oral toxicity category predictions (see **Section 6.3**).

#### 10.2.3.3 *Animal Savings for the UDP by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses*

**Tables 10-3** through **10-5** show mean animal use and mean animal savings for the UDP for the default starting dose and the NRU-determined starting dose with the test substances grouped by GHS acute oral toxicity category (UN 2005). The data come from the same analyses as the data provided in **Table 10-2**. NRU-determined starting doses were based on the:

- RC millimole regression (**Table 10-3**).
- RC rat-only weight regression (**Table 10-4**)
- RC rat-only weight regression excluding substances with specific mechanisms of toxicity other than basal cytotoxicity (**Table 10-5**)

Consistencies noted in the mean animal savings data provided in the tables included:

- For each *in vitro* NRU cytotoxicity test method and regression, animal savings were statistically significant for substances in the  $2000 < LD_{50} \leq 5000$  mg/kg and  $LD_{50} > 5000$  mg/kg toxicity categories.
- For substances with  $LD_{50} \leq 5$  mg/kg, the NHK NRU test method with each regression used slightly more animals than the default method (i.e., mean animal savings were negative). The 3T3 NRU test method produced nonsignificant animal savings of 0.31 (2.9%) to 0.95 (8.1%) animal for these substances.

For substances with  $50 < LD_{50} \leq 300$  mg/kg, all test methods and regressions produced little to no animal savings.

#### *Animal Savings for the UDP by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses with the RC Millimole Regression*

**Table 10-3** shows the animal savings by GHS toxicity category for the *in vitro* NRU cytotoxicity test methods used with the RC millimole regression. Mean animal savings were

statistically significant (i.e.,  $p < 0.05$ ) by a one-tailed Wilcoxon signed rank test for the following GHS toxicity categories, test methods, and dose-response slopes:

- $5 < LD_{50} \leq 50$  mg/kg for the NHK NRU at dose-response slope = 2 (0.86 [9.2%] animals)
- $2000 < LD_{50} \leq 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.25 [13.7%] to 1.52 [14.1%] animals)
- $LD_{50} > 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.35 [14.2%] to 1.70 [25.4%] animals)

For the 3T3 NRU and NHK NRU test methods, mean animal savings were similar for most toxicity categories at both dose-response slopes, with the mean savings for the 3T3 NRU slightly higher than that for the NHK NRU. For the dose-response slope of 2, mean animal savings for the 3T3 NRU test method (for the various toxicity categories) ranged from -0.09 (-1.0%) to 1.54 (16.1%) animals while mean animal savings for the NHK NRU test method ranged from -0.25 (-2.2%) to 1.45 (13.5%) animals. For the dose-response slope of 8.3, animal savings for the 3T3 NRU test method ranged from 0.004 (0.05%) to 1.70 (25.4%) animals while mean animal savings for the NHK NRU test method ranged from -0.11 (-1.5%) to 1.45 (21.8%) animals.

For both *in vitro* NRU cytotoxicity test methods, no mean animal savings ( $\leq 0.09$  animal) were observed for substances with  $50 < LD_{50} \leq 300$  mg/kg. This category includes the default starting dose of 175 mg/kg. Animal savings were not expected for this category since savings were determined by comparing animal use with the NRU-based starting dose with animal use at the default starting dose. For the 3T3 NRU, no animal savings (-0.9 to 0.004 animals) were also observed for substances with  $5 < LD_{50} \leq 50$  mg/kg. For the NHK NRU test method, animal use actually increased slightly compared to the default starting dose (-0.25 to -0.09 animals) for substances with  $LD_{50} \leq 5$  mg/kg. Animal savings for relatively high toxicity substances were noted for those in the  $LD_{50} \leq 5$  mg/kg category for the 3T3 NRU (0.78 [7.3%] to 0.95 [8.1%] animals) and in the  $5 < LD_{50} \leq 50$  mg/kg category for the NHK NRU (0.86 [9.2%] to 0.87 [10.5%] animals). Only the 0.86 (9.2%) animal savings for the dose-response slope of 2 (NHK NRU) were statistically significant.

**Table 10-3 Animal Use<sup>1</sup> for the UDP<sup>2</sup> by GHS Toxicity Category<sup>3</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods with the RC Millimole Regression<sup>4</sup>**

		Dose-Response Slope = 2			Dose-Response Slope = 8.3			Accuracy <sup>8</sup>
Toxicity Category <sup>3</sup>	Number of Reference Substances	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	
		3T3 NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	7	11.76 ± 0.16	10.8 ± 0.64	0.95 (8.1%)	10.65 ± 0.48	9.87 ±0.74	0.78 (7.3%)	0%
5 < LD <sub>50</sub> ≤ 50 mg/kg	6	9.06 ± 0.18	9.15 ± 0.72	-0.09 (-1.0%)	8.04 ± 0.24	8.04 ± 0.78	0.004 (0.05%)	17%
50 < LD <sub>50</sub> ≤ 300 mg/kg	6	7.70 ± 0.23	7.61 ± 0.18	0.09 (1.2%)	6.63 ± 0.35	6.59 ± 0.26	0.03 (0.5%)	67%
300 < LD <sub>50</sub> ≤ 2000 mg/kg	6	8.76 ± 0.34	7.91 ± 0.06	0.84 (9.6%)	7.30 ± 0.35	6.69 ± 0.20	0.61 (8.3%)	100%
2000 < LD <sub>50</sub> ≤ 5000 mg/kg	11	10.75 ± 0.08	9.23 ± 0.20	1.52* (14.1%)	9.16 ± 0.26	7.81 ± 0.34	1.36* (14.8%)	0%
LD <sub>50</sub> > 5000 mg/kg	10	9.59 ± 0.27	8.05 ± 0.39	1.54* (16.1%)	6.69 ± 0.37	4.99 ± 0.45	1.70* (25.4%)	10%
		NHK NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	7	11.54 ± 0.25	11.79 ± 0.50	-0.25 (-2.2%)	10.63 ± 0.49	10.72 ± 0.54	-0.09 (-0.8%)	0
5 < LD <sub>50</sub> ≤ 50 mg/kg	6	9.34 ± 0.24	8.48 ± 0. 24	0.86* (9.2%)	8.22 ± 0.31	7.35 ± 0.36	0.87 (10.5%)	50%
50 < LD <sub>50</sub> ≤ 300 mg/kg	6	7.82 ± 0.22	7.88 ± 0.26	-0.06 (-0.7%)	6.92 ± 0.38	7.02 ± 0.43	-0.11 (-1.5%)	50%
300 < LD <sub>50</sub> ≤ 2000 mg/kg	6	8.74 ± 0.34	7.93 ± 0.06	0.81 (9.3%)	7.31 ± 0.34	6.71 ± 0.23	0.60 (8.2%)	100%
2000 < LD <sub>50</sub> ≤ 5000 mg/kg	11	10.73 ± 0.08	9.29 ± 0.20	1.45* (13.5%)	9.13 ± 0.25	7.88 ± 0.33	1.25* (13.7%)	9%
LD <sub>50</sub> > 5000 mg/kg	11	9.52 ± 0.28	8.17 ± 0.41	1.35* (14.2%)	6.64 ± 0.35	5.19 ± 0.44	1.45* (21.8%)	0%

<sup>1</sup>Numbers are mean numbers of animals used and standard errors for 2000 simulations for each substance with a limit dose of 5000 mg/kg. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Results are provided for 46 substances in the 3T3 NRU test method and 47 substances in the NHK NRU test method categorized using the initial LD<sub>50</sub> values from **Table 3-2**. The slight differences in the number of animals used for the default starting dose at the same dose-response slope reflect different simulation runs.

<sup>2</sup>OECD (2001a); EPA (2002a).

<sup>3</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

<sup>4</sup>RC millimole regression is  $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \log \text{IC}_{50} (\text{mM}) + 0.625$ .

<sup>5</sup>Default starting dose = 175 mg/kg.

<sup>6</sup>Starting dose was one default dose lower than the predicted LD<sub>50</sub> calculated using the geometric mean of the laboratory geometric mean NRU IC<sub>50</sub> values in the RC millimole regression.

<sup>7</sup>Difference between mean animal use with default starting dose and mean animal use with NRU predicted LD<sub>50</sub>. Differences marked by \* are statistically significant ( $p < 0.05$ ) by a one-sided Wilcoxon signed rank test. Percentage difference shown in parentheses

<sup>8</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category (from **Table 6-4**).

**Table 10-3** also shows that mean animal savings did not correlate with the accuracy of the GHS acute oral toxicity category predictions. Substances in categories with the lowest accuracy produced the highest animal savings. Accuracy was the lowest (0 - 10%) for GHS acute oral toxicity category prediction for substances with  $LD_{50} > 5000$  mg/kg, but animal savings (1.35 - 1.70) were the highest. Animal savings (0.60 - 0.84 animals) for substances with  $300 \leq LD_{50} \leq 2000$  mg/kg, which had 100% accuracy for GHS acute oral toxicity category prediction, were similar to animal savings (0.78 - 0.95 animals) for substances in the  $LD_{50} < 5$  mg/kg category (for the 3T3 NRU), which had 0% accuracy. Perhaps the difference between the predicted starting dose and the true  $LD_{50}$  vs. the difference between the default starting dose and the true  $LD_{50}$  has more influence on animal savings than the accuracy of the  $LD_{50}$  prediction.

*Animal Savings for the UDP by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses with the RC Rat-Only Weight Regression*

**Table 10-4** shows the mean animal savings by GHS toxicity category for the *in vitro* NRU cytotoxicity test methods used with the RC rat-only weight regression. A comparison of mean animal savings, category for category, with the RC millimole regression, indicates that, in most cases, animal savings were slightly higher for the RC rat-only weight regression. For the RC rat-only weight regression, the mean differences between animal use for the default starting dose and mean animal use with the NRU-determined starting dose were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test for the following GHS toxicity categories, test methods, and dose-response slopes:

- $300 < LD_{50} \leq 2000$  mg/kg for the NHK NRU at dose-response slope = 2 (0.86 [9.8%] animals)
- $2000 < LD_{50} \leq 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.50 [16.4%] to 1.91 [17.7%] animals)
- $LD_{50} > 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.45 [15.2%] to 1.73 [25.9%] animals)

**Table 10-4 Animal Use<sup>1</sup> for the UDP<sup>2</sup> by GHS Toxicity Category<sup>3</sup> Using Starting Doses Based on the NRU Test Methods with the RC Rat-Only Weight Regression<sup>4</sup>**

		Dose-Response Slope = 2			Dose-Response Slope = 8.3			Accuracy <sup>8</sup>
Toxicity Category <sup>3</sup>	Number of Reference Substances	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose	Animals Saved <sup>7</sup>	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose	Animals Saved <sup>7</sup>	
		3T3 NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	11.75 ± 0.16	10.85 ± 0.61	0.89 (7.6%)	10.66 ± 0.48	9.93 ± 0.71	0.73 (6.8%)	0%
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	9.14 ± 0.17	8.80 ± 0.54	0.34 (3.7%)	8.12 ± 0.27	7.76 ± 0.59	0.36 (4.5%)	17%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	7.75 ± 0.22	7.60 ± 0.10	0.15 (1.9%)	6.71 ± 0.32	6.66 ± 0.23	0.05 (0.8%)	67%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	8.75 ± 0.33	7.89 ± 0.07	0.86* (9.8%)	7.29 ± 0.35	6.68 ± 0.21	0.61 (8.4%)	100%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	10.81 ± 0.08	8.90 ± 0.28	1.91* (17.7%)	9.18 ± 0.26	7.48 ± 0.42	1.70* (18.5%)	0%
> 5000 mg/kg	12	9.59 ± 0.27	7.96 ± 0.40	1.63* (17.0%)	6.69 ± 0.37	4.96 ± 0.45	1.73* (25.9%)	10%
		NHK NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	11.58 ± 0.23	11.66 ± 0.44	-0.08 (-0.7%)	10.66 ± 0.48	10.59 ± 0.53	0.07 (0.6%)	0
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	9.33 ± 0.26	8.39 ± 0.27	0.94 (10.1%)	8.20 ± 0.31	7.36 ± 0.38	0.84 (10.3%)	50%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	7.84 ± 0.21	7.93 ± 0.25	-0.09 (-1.1%)	6.94 ± 0.37	7.09 ± 0.41	-0.15 (-2.2%)	50%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	8.74 ± 0.34	7.92 ± 0.06	0.82 (9.3%)	7.31 ± 0.34	6.71 ± 0.23	0.60 (8.2%)	100%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	10.77 ± 0.07	9.07 ± 0.24	1.70*(15.8%)	9.14 ± 0.25	7.64 ± 0.37	1.50* (16.4%)	9%
LD <sub>50</sub> > 5000 mg/kg	13	9.52 ± 0.28	8.07 ± 0.40	1.45*(15.2%)	6.64 ± 0.35	5.09 ± 0.42	1.55* (23.3%)	0%

<sup>1</sup>Numbers are mean number of animals used and standard errors for 2000 simulations for each substance with a limit dose of 5000 mg/kg. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Results are provided for 46 substances in the 3T3 NRU test method and 47 substances in the NHK NRU test method categorized using the reference LD<sub>50</sub> values from **Table 4-2**. The slight differences in the number of animals used for the default starting dose at the same dose-response slope reflect different simulation runs.

<sup>2</sup>OECD (2001a); EPA (2002a).

<sup>3</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

<sup>4</sup>From **Table 6-2**;  $\log \text{LD}_{50} (\text{mg/kg}) = 0.372 \log \text{IC}_{50} (\mu\text{g/mL}) + 2.024$

<sup>5</sup>Default starting dose = 175 mg/kg.

<sup>6</sup>Starting dose was one default dose lower than NRU-predicted LD<sub>50</sub> calculated using the geometric mean of the laboratory geometric mean NRU IC<sub>50</sub> values in the RC rat-only regression.

<sup>7</sup>Difference between mean animal use with default starting dose and mean animal use with NRU predicted LD<sub>50</sub>. Differences marked by \* were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test. Percent difference is shown in parentheses.

<sup>8</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category (from **Table 6-5**).

For the dose-response slope of 2, mean animal savings (for the various toxicity categories) for the 3T3 NRU test method ranged from 0.15 (1.9%) to 1.91 (17.7%) animals while mean animal savings for the NHK NRU test method ranged from -0.09 (-1.1%) to 1.70 (15.8%) animals. For the dose-response slope of 8.3, animal savings for the 3T3 NRU test method ranged from 0.05 (0.8%) to 1.73 (25.9%) animals while animal savings for the NHK NRU test method ranged from -0.15 (-2.2%) to 1.55 (23.3%) animals.

For both *in vitro* NRU cytotoxicity test methods, no mean animal savings ( $\leq 0.15$  animal) were observed for substances with  $50 < LD_{50} \leq 300$  mg/kg. This category includes the default starting dose of 175 mg/kg. Animal savings were not expected for this category since savings were determined by comparing animal use with the NRU-based starting dose with animal use at the default starting dose. For the NHK NRU, no animal savings (-0.08 to 0.07 animals) were also observed for substances with  $LD_{50} \leq 5$  mg/kg. Animal savings for relatively high toxicity substances were noted in the  $LD_{50} \leq 5$  mg/kg category for the 3T3 NRU (0.73 [6.8%] to 0.89 [7.6%] animals) and in the  $5 < LD_{50} \leq 50$  mg/kg category for the NHK NRU (0.84 [10.3%] to 0.94 [10.1%] animals), but these savings were not statistically significant.

**Table 10-4** also shows that mean animal savings did not correlate with the accuracy of the GHS acute oral toxicity category predictions (see **Section 6.3**). The toxicity categories with the highest animal savings had low accuracy. Substances in the  $2000 < LD_{50} \leq 5000$  mg/kg and  $LD_{50} > 5000$  mg/kg categories had very low accuracy (0 - 10%) for GHS acute oral toxicity category prediction, but the animal savings were higher than for the other categories (1.45-1.91). Additionally, animal savings (0.61 - 0.86 animals) for substances with  $300 \leq LD_{50} \leq 2000$  mg/kg, which had 100% accuracy for GHS acute oral toxicity category prediction, were similar to animal savings (0.73 - 0.89 animals) for substances in the  $LD_{50} < 5$  mg/kg category (for the 3T3 NRU), which had 0% accuracy. Perhaps the difference between the predicted starting dose and the true  $LD_{50}$  vs. the difference between the default starting dose and the true  $LD_{50}$  has more influence on animal savings than the accuracy of the  $LD_{50}$  prediction.



Animal Savings for the UDP by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Action

**Table 10-5** shows the mean animal savings by GHS toxicity category for the *in vitro* NRU cytotoxicity test methods used with the RC rat-only weight regression excluding substances with specific mechanisms of toxicity other than basal cytotoxicity. For substances in the categories for  $LD_{50} > 2000$  mg/kg, mean animal savings for the RC rat-only weight regression excluding substances with specific mechanisms of toxicity other than basal cytotoxicity were slightly higher than those for the RC rat-only weight regression and those for the RC millimole regression. Mean differences between animal use for the default starting dose and mean animal use with the NRU-determined starting dose were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test for the following GHS toxicity categories, test methods, and dose-response slopes:

- $5 < LD_{50} \leq 50$  mg/kg for the NHK NRU at dose-response slope = 2 (0.98 [10.6%] animals)
- $300 < LD_{50} \leq 2000$  mg/kg for both NRU test methods and at dose-response = 2 (1.00 [11.4%] animals for the 3T3 NRU and 0.90 [10.3%] animals for the NHK NRU)
- $2000 < LD_{50} \leq 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.75 [19.1%] to 2.22 [20.5%] animals)
- $LD_{50} > 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.77 [18.6%] to 2.01 [30.1%] animals)

Mean animal savings for the 3T3 NRU and NHK NRU test methods were similar for each toxicity category and dose-response slope, with the 3T3 NRU test method producing slightly higher mean animal savings in most cases. For the dose-response slope of 2, mean animal savings across the various toxicity categories for the 3T3 NRU ranged from -0.02 (-0.2%) to 2.22 (20.5%) animals while mean animal savings for the NHK NRU ranged from -0.35 (-3.0%) to 1.98 (18.3%) animals.

**Table 10-5 Animal Use<sup>1</sup> for the UDP<sup>2</sup> By GHS Toxicity Category<sup>3</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity<sup>4</sup>**

		Dose-Response Slope = 2			Dose-Response Slope = 8.3			Accuracy <sup>8</sup>
Toxicity Category <sup>3</sup>	Number of Reference Substances	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose	Animals Saved <sup>7</sup>	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose	Animals Saved <sup>7</sup>	
		3T3 NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	11.68 ± 0.17	11.26 ± 0.55	0.42 (3.6%)	10.62 ± 0.48	10.31 ± 0.67	0.31 (2.9%)	0%
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	9.05 ± 0.13	9.03 ± 0.55	0.02 (0.3%)	8.07 ± 0.25	7.92 ± 0.59	0.15 (1.9%)	14%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	7.82 ± 0.18	7.84 ± 0.15	-0.02 (-0.2%)	6.93 ± 0.31	6.99 ± 0.29	-0.06 (-0.9%)	80%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	8.81 ± 0.35	7.81 ± 0.06	1.00* (11.4%)	7.31 ± 0.37	6.58 ± 0.18	0.73 (10.0%)	78%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	10.84 ± 0.07	8.62 ± 0.23	2.22* (20.5%)	9.18 ± 0.26	7.19 ± 0.37	2.00* (21.8%)	67%
> 5000 mg/kg	12	9.59 ± 0.27	7.71 ± 0.40	1.88* (19.6)%	6.69 ± 0.37	4.68 ± 0.46	2.01* (30.1%)	25%
		NHK NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	11.55 ± 0.23	11.90 ± 0.32	-0.35(-3.0%)	10.66 ± 0.48	10.83 ± 0.45	-0.18 (-1.6%)	0
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	9.28 ± 0.25	8.30 ± 0.28	0.98* (10.6%)	8.19 ± 0.32	7.30 ± 0.36	0.89 (10.9%)	14%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	7.87 ± 0.20	8.03 ± 0.24	-0.16 (-2.0%)	7.08 ± 0.34	7.26 ± 0.40	-0.19 (-2.6%)	60%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	8.76 ± 0.33	7.86 ± 0.06	0.90* (10.3%)	7.31 ± 0.34	6.61 ± 0.22	0.69 (9.5%)	89%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	10.82 ± 0.07	8.84 ± 0.26	1.98* (18.3%)	9.15 ± 0.25	7.41 ± 0.39	1.75* (19.1%)	44%
LD <sub>50</sub> > 5000 mg/kg	13	9.52 ± 0.28	7.75 ± 0.43	1.77* (18.6%)	6.64 ± 0.35	4.76 ± 0.44	1.88* (28.4%)	15%

<sup>1</sup>Numbers are mean number of animals used and standard errors for 2000 simulations for each substance with a limit dose of 5000 mg/kg. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Results are provided for 46 substances in the 3T3 NRU test method and 47 substances in the NHK NRU test method categorized using the reference LD<sub>50</sub> values from **Table 4-2**. The slight differences in the number of animals used for the default starting dose at the same dose-response slope reflect different simulation runs.

<sup>2</sup>OECD (2001a); EPA (2002a).

<sup>3</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

<sup>4</sup>From **Table 6-2**; log LD<sub>50</sub> (mg/kg) = 0.357 log IC<sub>50</sub> (μg/mL) + 2.194.

<sup>5</sup>Default starting dose = 175 mg/kg.

<sup>6</sup>Starting dose = One default dose lower than NRU-predicted LD<sub>50</sub> calculated using the geometric mean of laboratory mean IC<sub>50</sub> values in the RC rat-only weight regression excluding substances with specific mechanisms of toxicity.

534 <sup>7</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based LD<sub>50</sub>. Differences denoted by \* were statistically  
535 significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test. Percent difference is shown in parentheses.

536 <sup>8</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category  
537 (from **Table 6-6**).  
538

For the dose-response slope of 8.3, mean animal savings for the 3T3 NRU ranged from -0.06 (-0.9%) to 2.01 (30.1%) while mean animal savings for the NHK NRU ranged from -0.19 (-2.6%) to 1.88 (28.4%).

For both *in vitro* NRU cytotoxicity test methods, no mean animal savings were observed for substances with  $50 < LD_{50} \leq 300$  mg/kg. In fact, slightly more animals were used than when using the default starting dose (i.e., animal savings were negative; -0.02 to -0.16 animal). Since this category includes the default starting dose of 175 mg/kg, animal savings were not expected for this category since savings were determined by comparing animal use with the NRU-based starting dose with animal use at the default starting dose. For the NHK NRU test method, more animals were also used for substances with  $LD_{50} \leq 5$  mg/kg (i.e. animal savings were -0.18 to -0.35 animals). The exceptions for having little to no animal savings for the high toxicity substances was for the substances in the  $5 < LD_{50} \leq 50$  mg/kg category for the NHK NRU (0.89 [10.9%] to 0.98 [10.6%] animals), but only the 0.98 animals at dose-response = 2 was statistically significant.

**Table 10-5** also shows that mean animal savings did not correlate with the accuracy of the GHS acute oral toxicity category predictions (see **Section 6.3**). The toxicity categories with the highest animal savings had low accuracy. Substances with  $LD_{50} > 5000$  mg/kg had relatively low accuracy (15 - 25%) for GHS acute oral toxicity category prediction, but the animal savings were relatively high (1.88 - 2.01 animals). For the NHK NRU, substances in the  $5 < LD_{50} \leq 50$  mg/kg category had very low accuracy (14%) for GHS acute oral toxicity category prediction, but the animal savings were statistically significant (0.98 animals at dose-response = 2). Possibly the difference between the predicted starting dose and the true  $LD_{50}$  vs. the difference between the default starting dose and the true  $LD_{50}$  has more influence on animal savings than the accuracy of the  $LD_{50}$  prediction. The RC rat-only weight regression excluding substances with specific mechanisms of toxicity improved accuracy (compared with the RC millimole regression) and animal savings for the GHS toxicity categories for substances in the  $2000 < LD_{50} \leq 5000$  mg/kg and  $LD_{50} > 5000$  mg/kg categories. For substances in the  $2000 < LD_{50} \leq 5000$  mg/kg category, accuracy increased

from 0 - 9% (both *in vitro* test methods and dose-response slopes) to 44 - 67% and animal savings increased from 1.25 - 1.52 animals to 1.75 - 2.22 animals. For substances with  $LD_{50} > 5000$  mg/kg, accuracy increased from 0 - 10% (both *in vitro* NRU test methods and dose-response slopes) to 15 - 25% and animal savings increased from 1.35 - 1.70 animals to 1.77 - 2.01 animals. The RC rat-only weight regression excluding substances with specific mechanisms of toxicity, however, also improved animal savings for substances in the  $300 < LD_{50} \leq 2000$  mg/kg toxicity category while which accuracy was decreased compared with the RC millimole regression. Animal savings for substances in the  $300 < LD_{50} \leq 2000$  mg/kg toxicity category improved from 0.60 - 0.84 animals (for both *in vitro* NRU test methods and dose-response slopes) to 0.69 - 1.00 animals while accuracy decreased from 100% to 78 - 89%.

#### 10.2.4 Refinement of Animal Use for the UDP When Using 3T3 and NHK NRU-Based Starting Doses

A test method refines animal use when it lessens or eliminates pain or distress in animals or enhances animal well-being (ICCVAM 2003). This section evaluates whether the use of 3T3 and NHK NRU-based starting doses refines animal use by reducing the number of animals that die (i.e., experience pain and distress) during UDP testing compared to the number of animals that die when using the default starting dose of 175 mg/kg. **Table 10-6** reports the refinement results for the UDP simulation modeling using the 5000 mg/kg limit dose. For every regression evaluated, the mean number of deaths when using the NRU-based starting doses was slightly lower than the mean number of deaths when using the default starting dose by approximately 0.1 to 0.2 deaths. The percentage of deaths, however, was slightly higher for the NRU-based starting doses than for the default starting dose since the total number of animals used was lower for the NRU-based starting doses. In general, fewer animals were used and fewer animals died when using an NRU-based starting dose compared with use of the default starting dose.

**Table 10-6 Animal Deaths<sup>1</sup> for the UDP<sup>2</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods**

Assay/Regression	With Default Starting Dose <sup>3</sup>			With NRU-Based Starting Dose <sup>4</sup>		
	Used	Dead	% Deaths	Used	Dead	% Deaths
<b>3T3 NRU Test Method</b>	<b>Dose-Response Slope = 2</b>					
RC millimole <sup>5</sup>	9.77	4.16	42.6%	8.79	3.95	44.9%
RC rat-only weight <sup>6</sup>	9.79	4.18	42.6%	8.66	3.91	45.2%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>7</sup>	9.80	4.18	42.7%	8.64	4.03	46.6%
	<b>Dose-Response Slope = 8</b>					
RC millimole <sup>5</sup>	8.11	3.43	42.3%	7.20	3.26	45.3%
RC rat-only weight <sup>6</sup>	8.14	3.44	42.3%	7.11	3.24	45.6%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>7</sup>	8.16	3.45	42.3%	7.08	3.34	47.2%
<b>NHK NRU Test Method</b>	<b>Dose-Response Slope = 2</b>					
RC millimole <sup>5</sup>	9.75	4.10	42.0%	8.93	3.96	44.3%
RC rat-only weight <sup>6</sup>	9.77	4.11	42.0%	8.83	3.93	44.5%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>7</sup>	9.78	4.12	42.1%	8.73	3.99	45.8%
	<b>Dose-Response Slope = 8</b>					
RC millimole <sup>5</sup>	8.12	3.38	41.7%	7.33	3.26	44.5%
RC rat-only weight <sup>6</sup>	8.14	3.39	41.7%	7.25	3.24	44.7%
RC rat-only weight excluding substances with specific mechanisms of action <sup>7</sup>	8.15	3.40	41.7%	7.15	3.29	46.1%

<sup>1</sup>Numbers are mean numbers of animals used for 2000 simulations for each substance. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Upper limit dose = 5000 mg/kg. Results are provided for 46 substances in the 3T3 NRU and 47 substances in the NHK NRU test methods.

<sup>2</sup>OECD (2001a); EPA (2002a).

<sup>3</sup>Default starting dose = 175 mg/kg.

<sup>4</sup>Starting dose was one default dose lower than NRU-predicted LD<sub>50</sub> calculated using the geometric mean of laboratory mean IC<sub>50</sub> values in the regression specified.

<sup>5</sup>log LD<sub>50</sub> (mmol/kg) = 0.435 log IC<sub>50</sub> (mM) + 0.625

<sup>6</sup>log LD<sub>50</sub> (mg/kg) = 0.372 log IC<sub>50</sub> (µg/mL) + 2.024

<sup>7</sup>log LD<sub>50</sub> (mg/kg) = 0.357 log IC<sub>50</sub> (µg/mL) + 2.194

### 10.3 Reduction and Refinement of Animal Use for the ATC

#### 10.3.1 Procedure for *In Vivo* Testing Using the ATC

This section describes the general dosing procedure for the conduct of the ATC assay (OECD 2001d). The purpose of the ATC is to classify a test substance into the appropriate GHS category for acute oral toxicity for classification and labeling. This is done by estimating the range of the LD<sub>50</sub> values for a test substance rather than calculating a point estimate of the LD<sub>50</sub>. The time between doses is determined by the onset, duration, and severity of toxic signs. Guidance on the type of animals to use, animal housing, clinical observations, etc., which are outside the scope of the current discussion, are provided in the test guidelines (See **Appendix M**).

##### *Main Test*

The ATC is based on the stepwise administration of test substances to three animals at a time at one of a number of fixed doses: 5, 50, 300, and 2000 mg/kg (and 5000 mg/kg, if necessary). The starting dose is selected so that at least some of the animals die at that dose. If no information on which to base a starting dose is available, the default starting dose of 300 mg/kg is used. The next step, which may be to stop testing, test at the same dose, test at the next higher dose, or test at the next lower dose, is determined by the starting dose and the outcome of the three animals tested at the starting dose. For example, if the starting dose is 300 mg/kg and two to three animals die or are in a moribund state, the next step is to administer 50 mg/kg to three more animals. However, if zero to one animal dies at 300 mg/kg, three more animals are tested at 300 mg/kg. Most substances required two to four dose steps for substance classification. See **Appendix M** for the outcome-based testing sequence for each starting dose.

##### *Limit Test*

For test substances that are likely to be nontoxic, the ATC test method guideline includes a limit test in which six animals (three animals per step) are tested at the limit dose of 2000 mg/kg or 5000 mg/kg (OECD 2001d).

### 10.3.2 Procedure for Computer Simulation Modeling of the ATC

The simulation process for the ATC was performed using MATLAB<sup>®</sup> (The MathWorks, Inc. 1996-2004) computational software, which is functionally comparable to SAS<sup>®</sup> version 8. Two thousand simulations of ATC testing were run for each substance, NRU test method, and dose-mortality slope using an upper limit dose of 2000 mg/kg. The simulation process implements the distributional assumptions underlying the dose-mortality response. The lowest dose at which an animal dies in response to the administration of a toxic substance varies from animal to animal. For an entire population of animals, mortality is assumed to have a log-normal distribution with the mean equal to the log of the true LD<sub>50</sub>. Sigma ( $\sigma$ ), the variability of the simulated population, is the inverse of the slope of the dose-mortality curve. For any given dose, the probability that an animal will die is computed by the cumulative log-normal distribution:

$$\text{Probability (death)} = \frac{1}{\sigma\sqrt{2\pi}} \int_{-\infty}^{\log \text{dose}} e^{\frac{-(t - \log \text{true LD}_{50})^2}{2\sigma^2}} dt$$

Due to a lack of information for the real dose-mortality curves, the simulations assumed several different values of the slope (i.e., the inverse of  $\sigma$ ). Dose-mortality slopes of 0.5, 0.8, 2, 4, and 8.3 were chosen to be comparable to those chosen for simulation modeling of the UDP (see **Section 10.2.2**).

To model the variability of the NRU IC<sub>50</sub> values within and between laboratories, the values were log-transformed to normalize the distribution of values for each substance. The mean and variance of these log-transformed values were used to generate a log-normal distribution from which to randomly select an IC<sub>50</sub> value.

The simulation procedure used the following steps for each substance:

1. The LD<sub>50</sub> value (in mg/kg) from **Table 4-2** was entered as the true LD<sub>50</sub> value and the choices of assumed slope were entered as the true slope for the dose-mortality curve.



2. An  $IC_{50}$  value was selected from a distribution identified by the mean and variance of the  $IC_{50}$  values computed from the data to reflect that different laboratories produce different  $IC_{50}$  values in different situations (see **Table 5-3** for mean  $IC_{50}$  values and standard deviations).
3. The  $IC_{50}$  value from Step 2 was used in the regression model being evaluated to compute a predicted  $LD_{50}$  value to use as the starting dose.
4. The dosing simulation (of 2000 iterations) was run twice: once with the default starting dose of 300 mg/kg and once with a starting dose equal to the next fixed dose below the  $LD_{50}$  estimated by the regression being evaluated (i.e., the NRU-based starting dose). If the NRU-based starting dose was greater than the 2000 mg/kg limit dose, then testing proceeded using the 2000 mg/kg limit test rather than the main test.
5. For every dose group of three animals, one observation was sampled from a binomial distribution with the probability of death calculated by the probability equation for a population of three. The sampled value, referred to as  $N1$ , indicates the number of animals, 0, 1, 2, or 3, in the dosing group that die.
6. If  $N1 \leq 1$ , step 4 is repeated with the same dose. Now the sampled value from the binomial distribution is referred to as  $N2$ .
7. If  $N2 \leq 1$  and the dose is the highest dose tested, or the dose has already been decreased, the toxicity category is assigned and testing is terminated. If the dose is not the highest dose tested, or if the dose has not been decreased, the dose is increased to the next fixed dose and step 4 is repeated.
8. If  $N1 > 1$  or  $N2 > 2$ , and the dose is the lowest dose tested, or if the dose has already been increased, the toxicity category is assigned and testing is terminated. If the dose is not the lowest dose tested, or if the dose has not already been increased, the dose is decreased to the next fixed dose and step 4 is repeated.

### 10.3.3 Animal Savings for the ATC When Using 3T3 and NHK NRU-Based Starting Doses

#### 10.3.3.1 *The Effect of Dose-Response Slope on Animal Use*

As described in **Section 10.3.2**, the simulation modeling of animal use for the ATC used five different dose-mortality slopes to assess animal use under various conditions of population variability. **Table 10-7** shows how animal use for the simulated ATC changes with dose-response slope and mean animal use for ATC simulations when using the default starting dose of 300 mg/kg and when using a starting dose that was one fixed dose lower than that predicted by the 3T3 and NHK NRU IC<sub>50</sub> values with the RC millimole regression. The mean number of animals used for the ATC decreased slightly with increasing slope for both the default starting dose and the NRU-determined starting dose.

**Table 10-7 Change in Animal Use<sup>1</sup> with Dose-Response Slope for the ATC<sup>2</sup>**

Dose-Response Slope	Default Starting Dose <sup>1,3</sup>	NRU-Based Starting Dose <sup>1,4</sup>	Animals Saved <sup>5</sup>
<b>3T3 NRU Test Method</b>			
0.5	11.10 ± 0.07	10.11 ± 0.24	0.99* (8.9%)
0.8	10.98 ± 0.10	9.95 ± 0.27	1.03* (9.4%)
2.0	10.90 ± 0.16	9.76 ± 0.33	1.13* (10.4%)
4.0	10.84 ± 0.19	9.66 ± 0.35	1.17* (10.8%)
8.3	10.81 ± 0.21	9.64 ± 0.36	1.17* (10.8%)
<b>NHK NRU Test Method</b>			
0.5	11.10 ± 0.07	10.07 ± 0.22	1.03* (9.3%)
0.8	11.00 ± 0.09	9.90 ± 0.24	1.10* (10.0%)
2.0	10.93 ± 0.16	9.72 ± 0.30	1.21* (11.1%)
4.0	10.87 ± 0.19	9.61 ± 0.32	1.26* (11.6%)
8.3	10.84 ± 0.21	9.57 ± 0.34	1.27* (11.7%)

<sup>1</sup>Numbers are mean numbers of animals used and standard errors for 2000 simulations for 46 substances for the 3T3 NRU test method and 47 substances for the NHK NRU test method. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Limit dose = 2000 mg/kg.

<sup>2</sup>OECD (2001d).

<sup>3</sup>Default starting dose = 300 mg/kg.

<sup>4</sup>Next fixed dose lower than the predicted LD<sub>50</sub> calculated using the geometric mean of laboratory mean IC<sub>50</sub> values in the RC millimole regression:  $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \log \text{IC}_{50} (\text{mM}) + 0.625$ .

<sup>5</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based starting dose. Differences that were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon rank test are noted by \*. Percent difference is shown in parentheses.

The mean numbers of animals saved, which was statistically significant (i.e.,  $p < 0.05$  by one-sided Wilcoxon signed rank tests) when compared with mean animal use for the default

dose, generally increased with increasing slope. To simplify the presentation of animal savings and comparison of the various regressions and starting doses, future results in **Section 10.3.3** will be shown only for dose-response slopes of 2 and 8.3. Results for the other dose-mortality slopes are presented in **Appendices N4-N6**.

#### 10.3.3.2 Mean Animal Use for ATC Simulations of Testing the NICEATM/ECVAM

##### *Reference Substances – Comparison of Regressions and 3T3 and NHK NRU Test Methods*

**Table 10-8** shows the mean animal use for testing the NICEATM/ECVAM reference substances using the simulated ATC method when the starting dose was the default starting dose and when the starting dose was one fixed dose lower than that determined by the LD<sub>50</sub> predicted from the 3T3 and NHK NRU test methods and the regressions (shown in **Table 6-2**) evaluated in **Section 6.3** for prediction of GHS acute oral toxicity category. The mean difference in animal use between the two starting doses is the mean animal savings. All mean differences (i.e., mean animal savings) were statistically significant (i.e.,  $p < 0.05$  using one-sided Wilcoxon signed rank tests). Mean animal savings ranged from 1.13 (10.4%) to 2.28 (21.1%) animals depending upon the test method, regression, and dose-response slope. The lowest mean animal savings were obtained for the RC millimole regression (1.13 [10.4%] to 1.27 [11.7%] animals) and the highest mean animal savings were obtained with the RC rat-only regression excluding substances with specific mechanisms of toxicity (1.68 [15.4%] to 2.28 [21.1%] animals).

#### 10.3.3.3 Animal Savings for the ATC by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses

**Tables 10-9** through **10-11** show mean animal use and mean animal savings for the ATC when used with the *in vitro* NRU cytotoxicity test methods, organized by GHS toxicity category (UN 2005), and when based on the:

- RC millimole regression (**Table 10-9**)
- RC rat-only weight regression (**Table 10-10**)
- RC rat-only weight regression excluding substances with specific mechanisms of toxicity (**Table 10-11**)

753 **Table 10-8 Animal Use<sup>1</sup> for the ATC<sup>2</sup> Using Starting Doses Based on NRU Test Methods with Various Regressions**

Assay/Regression	With Default Starting Dose <sup>3</sup>	With NRU-Based Starting Dose <sup>4</sup>	Animals Saved <sup>5</sup>	With Default Starting Dose <sup>3</sup>	With NRU-Based Starting Dose <sup>5</sup>	Animals Saved <sup>5</sup>	Accuracy <sup>6</sup>
<b>3T3 NRU Test Method</b>	<b>Dose-Response Slope = 2</b>			<b>Dose-Response Slope = 8.3</b>			
RC millimole <sup>7</sup>	10.90 ± 0.16	9.76 ± 0.33	1.13* (10.4%)	10.81 ± 0.21	9.64 ± 0.36	1.17* (10.8%)	26%
RC rat-only weight <sup>8</sup>	10.90 ± 0.16	9.21 ± 0.31	1.68* (15.5%)	10.81 ± 0.21	8.84 ± 0.36	1.97* (18.2%)	35%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>9</sup>	10.90 ± 0.16	9.00 ± 0.29	1.90* (17.4%)	10.81 ± 0.21	8.53 ± 0.33	2.28* (21.1%)	46%
<b>NHK NRU Test Method</b>	<b>Dose-Response Slope = 2</b>			<b>Dose-Response Slope = 8.3</b>			
RC millimole <sup>7</sup>	10.93 ± 0.16	9.72 ± 0.30	1.21* (11.1%)	10.84 ± 0.21	9.57 ± 0.34	1.27* (11.7%)	28%
RC rat-only weight <sup>8</sup>	10.93 ± 0.16	9.45 ± 0.30	1.49* (13.6%)	10.84 ± 0.21	9.22 ± 0.34	1.62* (14.9%)	30%
RC rat-only weight excluding substances with specific mechanisms of toxicity <sup>9</sup>	10.93 ± 0.16	9.25 ± 0.26	1.68* (15.4%)	10.84 ± 0.21	8.91 ± 0.31	1.94* (17.9%)	38%

<sup>1</sup>Numbers are mean numbers of animals used and standard errors for 2000 ATC simulations each for 46 substances for the 3T3 NRU test method and 47 substances for the NHK NRU test method. Limit dose = 2000 mg/kg

<sup>2</sup>OECD (2001d).

<sup>3</sup>Default starting dose = 300 mg/kg.

<sup>4</sup>Starting dose was one fixed dose lower than NRU-predicted LD<sub>50</sub> calculated using the geometric mean of laboratory mean IC<sub>50</sub> values in the regression specified.

<sup>5</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based LD<sub>50</sub>. Percentage difference is shown in parentheses.

Differences marked by \* were statistically significant (i.e., p < 0.05) using a one-sided Wilcoxon signed rank test.

<sup>6</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category (from **Tables 6-4 to 6-6**).

<sup>7</sup>log LD<sub>50</sub> (mmol/kg) = 0.435 log IC<sub>50</sub> (mM) + 0.625.

<sup>8</sup>log LD<sub>50</sub> (mg/kg) = 0.372 log IC<sub>50</sub> (µg/mL) + 2.024.

<sup>9</sup>log LD<sub>50</sub> (mg/kg) = 0.357 log IC<sub>50</sub> (µg/mL) + 2.194.

The summarized data come from the same analyses as the data provided in **Table 10-8**.

Consistencies noted in the mean animal savings data provided in the tables included:

- For each test method and regression, the highest mean animal savings were generally in the  $LD_{50} \leq 5$  mg/kg and  $LD_{50} > 5000$  mg/kg toxicity categories.
- For each test method and regression, the lowest mean animal savings were in the  $50 < LD_{50} \leq 300$  mg/kg and  $300 < LD_{50} \leq 2000$  mg/kg toxicity categories.

*Animal Savings for the ATC by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses with the RC Millimole Regression*

**Table 10-9** shows the mean animal savings for the ATC by GHS toxicity category for the *in vitro* NRU test methods used with the RC millimole regression. Mean differences between animal use for the default starting dose and animal use with the NRU-determined starting dose were statistically significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test for the following GHS toxicity categories, test methods, and dose-response slopes:

- $LD_{50} \leq 5$  mg/kg for the 3T3 NRU at both dose-response slopes (2.75 [29.5%] to 2.80 [31.1%] animals)
- $2000 < LD_{50} \leq 5000$  mg/kg for the 3T3 NRU at dose-response slope = 8 (0.35 [2.9%] animals) and for the NHK NRU at dose-response slope = 2 (0.38 [3.4%] animals)
- $LD_{50} > 5000$  mg/kg for the 3T3 NRU at both dose-response slopes (2.32 [29.6%] and 2.46 [20.5%] animals) and for the NHK NRU at dose-response slope = 2 (2.34 [19.7%] animals)

For the dose-response slope of 2, mean animal savings for the 3T3 NRU test method ranged from -0.24 (-2.5%) to 2.75 (29.5%) animals while animal savings for the NHK NRU test method ranged from -0.02 (-0.2%) to 2.43 (19.9%) animals. For the dose-response slope of 8.3, mean animal savings for the 3T3 NRU test method ranged from -0.47 (-5.1%) to 2.80 (31.1%) animals while mean animal savings for the NHK NRU test method ranged from -0.23 (-2.4%) to 2.79 (23.0%) animals.

**Table 10-9 Animal Savings<sup>1</sup> for the ATC<sup>2</sup> by GHS Toxicity Category<sup>3</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods with the RC Millimole Regression<sup>4</sup>**

		Dose-Response Slope = 2			Dose-Response Slope = 8.3			Accuracy <sup>8</sup>
Toxicity Category <sup>3</sup>	Number of Reference Substances	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	
		3T3 NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	7	9.35 ± 0.11	6.60 ± 0.87	2.75* (29.5%)	9.00 ± 0.001	6.20 ± 0.88	2.80* (31.1%)	0%
5 < LD <sub>50</sub> ≤ 50 mg/kg	6	12.22 ± 0.05	11.12 ± 0.94	1.10 (9.0%)	12.13 ± 0.08	10.71 ± 1.00	1.42 (11.7%)	17%
50 < LD <sub>50</sub> ≤ 300 mg/kg	6	10.70 ± 0.37	10.01 ± 0.08	0.69 (6.5%)	9.72 ± 0.48	9.39 ± 0.16	0.32 (3.3%)	67%
300 < LD <sub>50</sub> ≤ 2000 mg/kg	6	9.79 ± 0.08	10.04 ± 0.14	-0.24 (-2.5%)	9.20 ± 0.11	9.67 ± 0.27	-0.47 (-5.1%)	100%
2000 < LD <sub>50</sub> ≤ 5000 mg/kg	11	11.18 ± 0.08	11.02 ± 0.13	0.16 (1.4%)	11.90 ± 0.04	11.55 ± 0.20	0.35* (2.9%)	0%
LD <sub>50</sub> > 5000 mg/kg	10	11.90 ± 0.03	9.58 ± 0.91	2.32* (19.5%)	12.00 ± 0.000	9.54 ± 0.97	2.46* (20.5%)	10%
		NHK NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	7	9.37 ± 0.12	7.62 ± 1.12	1.76 (18.7%)	9.00 ± 0.002	7.25 ± 1.04	1.75 (19.5%)	0%
5 < LD <sub>50</sub> ≤ 50 mg/kg	6	12.2 ± 0.04	9.77 ± 0.34	2.43 (19.9%)	12.14 ± 0.09	9.35 ± 0.18	2.79 (23.0%)	50%
50 < LD <sub>50</sub> ≤ 300 mg/kg	6	10.75 ± 0.39	10.32 ± 0.36	0.43 (4.0%)	9.74 ± 0.49	9.97 ± 0.78	-0.23 (-2.4%)	50%
300 < LD <sub>50</sub> ≤ 2000 mg/kg	6	9.79 ± 0.08	9.81 ± 0.08	-0.02 (-0.2%)	9.21 ± 0.13	9.28 ± 0.13	-0.06 (-0.7%)	100%
2000 < LD <sub>50</sub> ≤ 5000 mg/kg	11	11.19 ± 0.09	10.81 ± 0.27	0.38* (3.4%)	11.90 ± 0.04	11.17 ± 0.73	0.73 (6.2%)	9%
LD <sub>50</sub> > 5000 mg/kg	11	11.92 ± 0.02	9.58 ± 0.85	2.34* (19.7%)	12.00 ± 0.000	9.52 ± 0.90	2.48 (20.6%)	0%

<sup>1</sup>Numbers are mean number of animals used and standard errors for 2000 simulations for each substance with a limit dose of 2000 mg/kg. Results are provided for 46 substances in the 3T3 NRU test method and 47 substances in the NHK NRU test method categorized using the initial LD<sub>50</sub> values from **Table 3-2**.

Although the simulations used whole animals, averaging the results produced fractional numbers of animals.

<sup>2</sup>OECD (2001d).

<sup>3</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

<sup>4</sup>RC millimole regression is  $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \log \text{IC}_{50} (\text{mM}) + 0.625$ .

<sup>5</sup>Default starting dose = 300 mg/kg.

<sup>6</sup>Starting dose was the next fixed dose lower than the predicted LD<sub>50</sub> from using the NRU IC<sub>50</sub> in the RC millimole regression.

<sup>7</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based starting dose. Statistically significant differences (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test are noted by \*. Percentage difference is shown in parentheses.

<sup>8</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category (from **Table 6-4**).

For both dose-response slopes, the mean animal savings using the 3T3 NRU test method was lower than the mean animal savings using the NHK NRU test method for substances in four of the six toxicity categories:  $5 < LD_{50} \leq 50$  mg/kg;  $3000 < LD_{50} \leq 2000$ ;  $2000 < LD_{50} \leq 5000$  mg/kg; and  $LD_{50} > 5000$  mg/kg. Mean animal savings using the 3T3 NRU test method was higher than the mean animal savings using the NHK NRU test method for substances in the other two toxicity categories:  $LD_{50} \leq 5$  mg/kg and  $50 < LD_{50} \leq 300$  mg/kg. For the 3T3 NRU test method, the highest mean animal savings occurred for substances in the category for  $LD_{50} \leq 5$  mg/kg (23.2 [19.5%] animals at dose-response slope = 2 and 2.46 [20.5%] animals at dose-response slope = 8.3). For the NHK NRU test method, the highest mean animal savings occurred for substances in the category for  $5 < LD_{50} \leq 50$  mg/kg (2.43 [19.9%] animals at dose-response slope = 2 and 2.79 [23.0%] animals at dose-response slope = 8.3); however, the animal savings were not statistically significant.

For both test methods, the smallest mean animal savings ( $\leq 0.69$ ) were observed for substances with  $LD_{50}$  values between 50 and 2000 mg/kg. Since the default starting dose was 300 mg/kg, little change in mean animal use was expected for substances in the  $50 < LD_{50} \leq 300$  mg/kg and  $300 < LD_{50} \leq 2000$  mg/kg categories. For both test methods and dose-response slopes, mean animal savings for the substances in the  $50 < LD_{50} \leq 300$  mg/kg category were -0.23 to 0.69 animals. For both test methods and dose-response slopes, there were no animal savings for substances in the  $300 < LD_{50} \leq 2000$  mg/kg category. In fact, slight more animals were used for the NRU-based starting doses than for the default starting dose (-0.02 to -0.47 animals).

**Table 10-9** also shows that mean animal savings did not correlate with the accuracy of the GHS acute oral toxicity category predictions (see **Section 6.3**). The toxicity categories with the highest animal savings had low accuracy. The 3T3 NRU test method produced the highest animal savings (2.75 - 2.80) for substances with  $LD_{50} \leq 5$  mg/kg, which had 0% accuracy for GHS acute oral toxicity category prediction. Substances in the  $300 < LD_{50} \leq 2000$  mg/kg category had 100% accuracy for GHS acute oral toxicity category prediction, but had no animal savings ( $\leq 0.2$  animals). Possibly the difference between the

predicted starting dose and the true LD<sub>50</sub> vs. the difference between the default starting dose and the true LD<sub>50</sub> has more influence on animal savings than the accuracy of the LD<sub>50</sub> prediction.

*Animal Savings for the ATC by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses with the RC Rat-Only Weight Regression*

**Table 10-10** shows the animal savings for the simulation ATC method by GHS toxicity category for the *in vitro* NRU cytotoxicity test methods used with the RC rat-only weight regression. Mean animal savings were statistically significant (i.e.,  $p < 0.05$ ) by a one-tailed Wilcoxon signed rank test for the following GHS toxicity categories, test methods, and dose-response slopes:

- LD<sub>50</sub> ≤ 5 mg/kg for both NRU test methods and dose-response slopes (2.03 [21.9%] to 2.57 [28.5%] animals)
- 2000 < LD<sub>50</sub> ≤ 5000 mg/kg for the 3T3 NRU test method at both dose-response slopes (1.39 [12.4%] to 2.56 [21.5%] animals)
- LD<sub>50</sub> > 5000 mg/kg for both NRU test methods and dose-response slopes (2.92 [24.5%] to 3.5 [29.2%] animals)

For the 3T3 NRU and NHK NRU test methods, mean animal savings were similar for most toxicity categories at both dose-response slopes, with the mean savings for the 3T3 NRU slightly higher than that for the NHK NRU for most toxicity categories. For the dose-response slope of 2, mean animal savings for the 3T3 NRU test method (for the various toxicity categories) ranged from -0.32 (-3.3%) to 32.8 (27.5%) animals while mean animal savings for the NHK NRU test method ranged from 0.03 (0.3%) to 2.92 (24.5%) animals. For the dose-response slope of 8.3, animal savings for the 3T3 NRU test method ranged from -0.63 (-6.8%) to 3.50 (29.2%) animals while mean animal savings for the NHK NRU test method ranged from -0.23 (-2.4%) to 3.12 (26.0%) animals.

For both test methods, there were no mean animal savings ( $\leq 0.03$  animals) for substances with LD<sub>50</sub> values between 300 and 2000 mg/kg. For both test methods and dose-response slopes, mean animal savings for the substances in the  $50 < \text{LD}_{50} \leq 300$  mg/kg category were



874 **Table 10-10 Animal Savings<sup>1</sup> for the ATC<sup>2</sup> by GHS Toxicity Category<sup>3</sup> Using Starting Doses Based on the 3T3 and NHK**  
 875 **NRU Test Methods with the RC Rat-Only Weight Regression<sup>4</sup>**

		Dose-Response Slope = 2			Dose-Response Slope = 8.3			Accuracy <sup>8</sup>
Toxicity Category <sup>3</sup>	Number of Reference Substances	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	
		3T3 NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	9.35 ± 0.11	6.83 ± 0.84	2.52* (27.0%)	9.00 ± 0.001	6.43 ± 0.85	2.57* (28.5%)	0%
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	12.22 ± 0.05	10.33 ± 0.52	1.88 (15.4%)	12.13 ± 0.08	9.94 ± 0.54	2.20 (18.1%)	14%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	10.70 ± 0.37	9.94 ± 0.10	0.76 (7.1%)	9.72 ± 0.48	9.23 ± 0.12	0.48 (5.0%)	80%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	9.79 ± 0.08	10.11 ± 0.29	-0.32 (-3.3%)	9.20 ± 0.11	9.83 ± 0.55	-0.63 (-6.8%)	78%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	11.18 ± 0.08	9.79 ± 0.47	1.39* (12.4%)	11.9 ± 0.04	9.34 ± 0.82	2.56* (21.5%)	44%
> 5000 mg/kg	12	11.90 ± 0.03	8.62 ± 0.94	3.28* (27.5%)	12.00 ± 0.00	8.50 ± 0.99	3.50* (29.2%)	0%
		NHK NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	9.37 ± 0.12	7.32 ± 0.88	2.05* (21.9%)	9.00 ± 0.002	6.97 ± 0.81	2.03* (22.6%)	0%
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	12.20 ± 0.04	9.72 ± 0.30	2.48 (20.3%)	12.14 ± 0.08	9.35 ± 0.17	2.79 (23.0%)	14%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	10.75 ± 0.39	10.30 ± 0.34	0.45 (4.2%)	9.74 ± 0.49	9.97 ± 0.78	-0.23 (-2.4%)	60%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	9.79 ± 0.08	9.76 ± 0.08	0.03 (0.3%)	9.21 ± 0.13	9.20 ± 0.11	0.02 (0.2%)	89%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	11.19 ± 0.09	10.45 ± 0.40	0.73 (6.6%)	11.90 ± 0.04	10.55 ± 0.69	1.35 (11.3%)	11%
LD <sub>50</sub> > 5000 mg/kg	13	11.92 ± 0.02	9.00 ± 0.88	2.92* (24.5%)	12.00 ± 0.00	8.88 ± 0.93	3.12* (26.0%)	8%

876 <sup>1</sup>Numbers are mean number of animals used and standard errors for 2000 simulations for each substance with a limit dose of 5000 mg/kg. Although the  
 877 simulations used whole animals, averaging the results produced fractional numbers of animals. Results are provided for 46 substances in the 3T3 NRU test  
 878 method and 47 substances in the NHK NRU test method categorized using the reference LD<sub>50</sub> values from **Table 4-2**.

879 <sup>2</sup>OECD (2001d).

880 <sup>3</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

881 <sup>4</sup>From **Table 6-2**;  $\log \text{LD}_{50} (\text{mg/kg}) = 0.372 \log \text{IC}_{50} (\mu\text{g/mL}) + 2.024$

882 <sup>5</sup>Default starting dose = 300 mg/kg.

883 <sup>6</sup>Starting dose was one fixed dose lower than the NRU-predicted LD<sub>50</sub> calculated using the NRU IC<sub>50</sub> in the RC rat-only weight regression.

884 <sup>7</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based LD<sub>50</sub>. Differences marked by \* were statistically  
 885 significant (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test. Percentage difference is shown in parentheses.

886 <sup>8</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category  
 887 (from **Table 6-5**).  
 888

also relatively small (-0.23 to 0.76) animals. Since the default starting dose was 300 mg/kg, little change in mean animal use was expected for substances in the  $50 < LD_{50} \leq 300$  mg/kg and  $300 < LD_{50} \leq 2000$  mg/kg categories.

**Table 10-10** also shows that mean animal savings did not correlate with the accuracy of the GHS acute oral toxicity category predictions (see **Section 6.3**). The toxicity categories with the highest animal savings had low accuracy. For example, animal savings for substances in the  $LD_{50} > 5000$  mg/kg category were 2.92 - 3.50 animals (for both *in vitro* NRU test methods and dose-response slopes) and accuracy was 0 - 8%. In addition, substances in toxicity categories with the lowest animal savings had the highest accuracy for GHS acute oral toxicity category prediction. Substances in the  $300 < LD_{50} \leq 2000$  mg/kg category had relatively high accuracy for GHS acute oral toxicity category prediction (i.e., 78% for the 3T3 NRU and 89% for the NHK NRU), but had the lowest animal savings ( $\leq 0.45$  animals). Possibly the difference between the predicted starting dose and the true  $LD_{50}$  vs. the difference between the default starting dose and the true  $LD_{50}$  has more influence on animal savings than the accuracy of the  $LD_{50}$  prediction.

*Animal Savings for the ATC by Toxicity Category Using 3T3 and NHK NRU-Based Starting Doses with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity*

**Table 10-11** shows the animal savings by GHS toxicity category for simulated ATC testing using the *in vitro* NRU cytotoxicity test methods with the RC rat-only weight regression excluding substances with specific mechanisms of toxicity. Mean animal savings were statistically significant (i.e.,  $p < 0.05$ ) by a one-tailed Wilcoxon signed rank test for the following GHS toxicity categories, test methods, and dose-response slopes:

- $LD_{50} \leq 5$  mg/kg for the 3T3 NRU test method at dose-response slope = 8.3 (2.16 [24.0%] animals) and for the NHK NRU test method at dose-response slope = 2 (1.27 [13.5%] animals)
- $2000 < LD_{50} \leq 5000$  mg/kg for both NRU test methods and both dose-response slopes (1.23 [11.0%] to 3.07 [25.8%] animals)

- LD<sub>50</sub> > 5000 mg/kg for both NRU test methods and both dose-response slopes (3.79 [31.8%] to 4.04 [33.7%] animals)

For the 3T3 NRU and NHK NRU test methods, mean animal savings were similar for most toxicity categories at both dose-response slopes, with the mean savings for the 3T3 NRU slightly higher than that for the NHK NRU. For the dose-response slope of 2, mean animal savings for the 3T3 NRU test method (for the various toxicity categories) ranged from 0.02 (0.2%) to 4.08 (34.3%) animals while mean animal savings for the NHK NRU test method ranged from 0.00 (0.0%) to 3.79 (31.8%) animals. For the dose-response slope of 8.3, animal savings for the 3T3 NRU test method ranged from -0.03 (-0.4%) to 4.38 (36.5%) animals while mean animal savings for the NHK NRU test method ranged from -0.06 (-0.6%) to 4.04 (33.7%) animals.

For both test methods, there were no mean animal savings ( $\leq 0.02$  animals) for substances with LD<sub>50</sub> values between 300 and 2000 mg/kg. For both test methods and dose-response slopes, mean animal savings for the substances in the  $50 < \text{LD}_{50} \leq 300$  mg/kg category were also relatively small (-0.06 to 0.79) animals. Since the default starting dose was 300 mg/kg, little change in mean animal use was expected for substances in the  $50 < \text{LD}_{50} \leq 300$  mg/kg and  $300 < \text{LD}_{50} \leq 2000$  mg/kg categories.

**Table 10-11** also shows that mean animal savings did not correlate with the accuracy of the GHS acute oral toxicity category predictions (see **Section 6.3**). The toxicity category with the highest animal savings (LD<sub>50</sub> > 5000 mg/kg) had low accuracy (15 - 25%). Substances in the  $300 < \text{LD}_{50} \leq 2000$  mg/kg category had very high accuracy, 78-89%, but no animal savings. Perhaps the difference between the predicted starting dose and the true LD<sub>50</sub> vs. the difference between the default starting dose and the true LD<sub>50</sub> has more influence on animal savings than the accuracy of the LD<sub>50</sub> prediction.

**Table 10-11 Animal Savings<sup>1</sup> for the ATC<sup>2</sup> By GHS Toxicity Category<sup>3</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods with the RC Rat-Only Weight Regression Excluding Substances with Specific Mechanisms of Toxicity<sup>4</sup>**

		Dose-Response Slope = 2			Dose-Response Slope = 8.3			Accuracy <sup>8</sup>
Toxicity Category <sup>3</sup>	Number of Reference Substances	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	With Default Starting Dose <sup>5</sup>	With NRU-Based Starting Dose <sup>6</sup>	Animals Saved <sup>7</sup>	
		3T3 NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	9.35 ± 0.11	7.23 ± 0.83	2.12 (22.6%)	9.00 ± 0.001	6.84 ± 0.86	2.16* (24.0%)	0%
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	12.22 ± 0.05	10.52 ± 0.50	1.70 (13.9%)	12.13 ± 0.08	10.18 ± 0.54	1.96 (16.1%)	14%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	10.70 ± 0.37	9.92 ± 0.09	0.79 (7.3%)	9.72 ± 0.48	9.24 ± 0.13	0.48 (4.9%)	80%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	9.79 ± 0.08	9.77 ± 0.07	0.02 (0.2%)	9.20 ± 0.11	9.24 ± 0.13	-0.03 (-0.4%)	78%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	11.18 ± 0.08	9.50 ± 0.47	1.67* (15.0%)	11.90 ± 0.04	8.83 ± 0.82	3.07* (25.8%)	67%
> 5000 mg/kg	12	11.90 ± 0.03	7.82 ± 0.77	4.08* (34.3%)	12.00 ± 0.00	7.62 ± 0.82	4.38* (36.5%)	25%
		NHK NRU Test Method						
LD <sub>50</sub> ≤ 5 mg/kg	4	9.37 ± 0.12	8.11 ± 0.65	1.27* (13.5%)	9.00 ± 0.002	7.76 ± 0.58	1.24 (13.8%)	0%
> 5 < LD <sub>50</sub> ≤ 50 mg/kg	7	12.20 ± 0.04	9.87 ± 0.33	2.33 (19.1%)	12.14 ± 0.09	9.52 ± 0.27	2.62 (21.6%)	14%
> 50 < LD <sub>50</sub> ≤ 300 mg/kg	5	10.75 ± 0.39	10.19 ± 0.26	0.55 (5.2%)	9.74 ± 0.49	9.80 ± 0.61	-0.06 (-0.6%)	60%
> 300 < LD <sub>50</sub> ≤ 2000 mg/kg	9	9.79 ± 0.08	9.79 ± 0.08	0.00 (0.0%)	9.21 ± 0.13	9.21 ± 0.12	0.01 (0.1%)	89%
> 2000 < LD <sub>50</sub> ≤ 5000 mg/kg	9	11.19 ± 0.09	9.96 ± 0.45	1.23* (11.0%)	11.90 ± 0.04	9.62 ± 0.80	2.28* (19.2%)	44%
LD <sub>50</sub> > 5000 mg/kg	13	11.92 ± 0.02	8.13 ± 0.76	3.79* (31.8%)	12.00 ± 0.000	7.96 ± 0.81	4.04* (33.7%)	15%

<sup>1</sup>Numbers are mean number of animals used and standard errors for 2000 simulations for each substance with a limit dose of 2000 mg/kg. Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Results are provided for 46 substances in the 3T3 NRU test method and 47 substances in the NHK NRU test method categorized using the reference LD<sub>50</sub> values from **Table 4-2**.

<sup>2</sup>OECD (2001d).

<sup>3</sup>GHS-Globally Harmonized System of Classification and Labelling of Chemicals with LD<sub>50</sub> in mg/kg (UN 2005).

<sup>4</sup>From **Table 6-2**;  $\log \text{LD}_{50} (\text{mg/kg}) = 0.357 \log \text{IC}_{50} (\mu\text{g/mL}) + 2.194$ .

<sup>5</sup>Default starting dose = 300 mg/kg.

<sup>6</sup>Starting dose was one fixed dose lower than the NRU-predicted LD<sub>50</sub> calculated using the NRU IC<sub>50</sub> in the RC rat-only weight regression excluding substances with specific mechanisms of toxicity.

<sup>7</sup>Difference between mean animal use with default starting dose and mean animal use with NRU-based LD<sub>50</sub>. Statistically significant differences (i.e.,  $p < 0.05$ ) by a one-sided Wilcoxon signed rank test are noted by \*. Percentage difference is shown in parentheses.

960 <sup>8</sup>Proportion of substances for which the GHS acute oral toxicity category (UN 2005) predicted by the *in vitro* NRU test methods matched the *in vivo* category  
961 (from **Table 6-5**).

The RC rat-only weight regression excluding substances with specific mechanisms of toxicity improved accuracy (compared with the RC millimole regression) and animal savings for the GHS toxicity categories for substances in the  $2000 < LD_{50} \leq 5000$  mg/kg and  $LD_{50} > 5000$  mg/kg categories. For the  $2000 < LD_{50} \leq 5000$  mg/kg category, accuracy improved from 0 - 9% (both *in vitro* NRU test methods) to 44 - 67% and animal savings improved from 0.16 - 0.73 animals to 1.23 - 3.07 animals. For substances with  $LD_{50} > 5000$  mg/kg, accuracy improved from 0 - 10% (both *in vitro* NRU test methods) to 15 - 25% and animal savings improved from 2.32 - 2.48 animals to 3.79 - 4.38 animals. Although the RC rat-only weight regression excluding substances with specific mechanisms of toxicity had no animal savings for substances in the  $300 < LD_{50} \leq 2000$  mg/kg toxicity category ( $\leq 0.02$  animals), it produced a small improvement over the RC millimole regression since as high as 0.47 more animals were used (compared with the default starting dose).

#### 10.3.4 Refinement of Animal Use for the ATC when using 3T3 and NHK NRU-Based Starting Doses

A test method refines animal use when it lessens or eliminates pain or distress in animals or enhances animal well-being (ICCVAM 2003). This section evaluates whether the use of 3T3 and NHK NRU-based starting doses refines animal use by reducing the number of animals that die during ATC testing compared to the number of animals that die when using the default starting dose of 300 mg/kg. **Table 10-12** reports the refinement results for the ATC simulation modeling using the 2000 mg/kg limit dose. For every regression evaluated, the mean number of deaths when using the 3T3 and NHK NRU-based starting doses was less than the mean number of deaths when using the default starting dose by approximately 0.6 to 0.7 deaths. For the RC millimole regression and the RC rat-only weight regression, the percentage of deaths (compared with the number of animals used) was also slightly lower for the NRU-based starting dose compared with the default starting dose. For the RC rat-only weight regression excluding substances with specific mechanisms of action, the percentage of deaths (compared to the total number of animals used) when using the 3T3 and NHK NRU-based starting doses was about the same as the percentage of deaths when using the default starting dose. In general, fewer animals were used with the NRU-based starting dose and fewer animals died.

**Table 10-12 Animal Deaths<sup>1</sup> for the ATC<sup>2</sup> Using Starting Doses Based on the 3T3 and NHK NRU Test Methods**

Assay/ Regression	Default Starting Dose <sup>3</sup>			NRU-Based Starting Dose <sup>4</sup>		
	Used	Dead	% Deaths	Used	Dead	% Deaths
<b>3T3 NRU</b>	<b>Dose-Response Slope = 2</b>					
RC millimole <sup>5</sup>	10.90	3.55	32.6%	9.76	2.87	29.4%
RC rat-only <sup>6</sup>	10.90	3.55	32.6%	9.21	2.82	30.6%
RC rat-only excluding substances with specific mechanisms of toxicity <sup>7</sup>	10.90	3.55	32.6%	9.00	2.92	32.4%
	<b>Dose-Response Slope = 8.3</b>					
RC millimole <sup>5</sup>	10.81	3.03	28.0%	9.64	2.38	24.7%
RC rat-only <sup>6</sup>	10.81	3.03	28.0%	8.84	2.33	26.3%
RC rat-only excluding substances with specific mechanisms of toxicity <sup>7</sup>	10.81	3.03	28.0%	8.53	2.42	28.3%
<b>NHK NRU</b>	<b>Dose-Response Slope = 2</b>					
RC millimole <sup>5</sup>	10.93	3.47	31.8%	9.72	2.82	29.0%
RC rat-only <sup>6</sup>	10.93	3.47	31.8%	9.45	2.78	29.4%
RC rat-only excluding substances specific mechanisms of toxicity <sup>7</sup>	10.93	3.47	31.8%	9.25	2.91	31.5%
	<b>Dose-Response Slope = 8.3</b>					
RC millimole <sup>5</sup>	10.84	2.97	27.4%	9.57	2.34	24.4%
RC rat-only <sup>6</sup>	10.84	2.97	27.4%	9.22	2.30	24.9%
RC rat-only excluding substances with specific mechanisms of toxicity <sup>7</sup>	10.84	2.97	27.4%	8.91	2.43	27.3%

<sup>1</sup>Numbers are mean numbers of animals used for 2000 simulations for each substance (46 substances in the 3T3 NRU test method and 47 substances in the NHK NRU test method). Although the simulations used whole animals, averaging the results produced fractional numbers of animals. Upper limit dose = 2000 mg/kg.

<sup>2</sup>OECD (2001d).

<sup>3</sup>Default starting dose = 300 mg/kg.

<sup>4</sup>Starting dose was one fixed dose lower than the NRU-predicted LD<sub>50</sub>.

<sup>5</sup> $\log \text{LD}_{50} (\text{mmol/kg}) = 0.435 \log \text{IC}_{50} (\text{mM}) + 0.625$ .

<sup>6</sup> $\log \text{LD}_{50} (\text{mg/kg}) = 0.372 \log \text{IC}_{50} (\mu\text{g/mL}) + 2.024$ .

<sup>7</sup> $\log \text{LD}_{50} (\text{mmol/kg}) = 0.357 \log \text{IC}_{50} (\text{mM}) + 2.194$ .

## 10.4 Summary

Computer simulation modeling of UDP testing using the default dose progression shows that, for the subset of NICEATM/ECVAM reference substances evaluated, the prediction of starting doses using the 3T3 and NHK NRU test methods with the RC millimole regression

1010 resulted in the use of statistically ( $p < 0.05$ ) fewer animals for UDP testing by an average of  
1011 0.79 - 0.97 animals (8.4 - 11.2%) depending upon the *in vitro* NRU cytotoxicity test method  
1012 and the dose-response slope (of 2 or 8.3) used. Mean animal savings improved to 1.00 to  
1013 1.16 animals (10.7 - 13.3%) for the RC rat-only weight regression excluding substances with  
1014 specific mechanisms of toxicity.

1015  
1016 When reference substances were grouped by GHS toxicity category, there were no mean  
1017 animal savings for simulated UDP testing for substances with  $50 < LD_{50} \leq 300$  mg/kg.  
1018 Statistically significant animal savings were observed for substances with  $2000 < LD_{50} \leq$   
1019  $5000$  mg/kg and  $LD_{50} > 5000$  mg/kg for both NRU test methods. When using the RC  
1020 millimole regression, animal savings for these categories ranged from 1.25 to 1.70 animals  
1021 (13.5 to 25.4%). Use of the RC rat-only weight regression excluding substances with  
1022 specific mechanisms of toxicity improved animal savings for substances in these toxicity  
1023 categories to 1.75 to 2.22 animals (18.3 to 30.1%). Using the 3T3 and NHK NRU  $IC_{50}$   
1024 values to estimate starting doses for the simulated UDP also resulted approximately 0.1 to 0.2  
1025 fewer mean deaths compared with the use of the default starting dose.

1026  
1027 Computer simulation modeling of ATC testing with GHS cut points shows that, for the  
1028 reference substances tested in this validation study, the prediction of starting doses using the  
1029 3T3 and NHK NRU test methods with the RC millimole regression resulted in the use of  
1030 statistically ( $p < 0.05$ ) fewer animals for ATC testing by an average of 1.13 to 1.27 animals  
1031 (10.4 - 11.7%) depending upon the *in vitro* NRU cytotoxicity test method and the dose-  
1032 response slope (of 2 or 8.3) used. Animal savings improved to a mean of 1.68 to 2.28  
1033 animals (15.4 - 21.1%) for the RC rat-only weight regression excluding substances with  
1034 specific mechanisms of toxicity.

1035  
1036 When test substances were grouped by GHS toxicity category, mean animal savings for ATC  
1037 testing using the RC millimole regression were statistically significant for the 3T3 NRU at  
1038 both dose-response slopes for substances with  $LD_{50} \leq 5$  mg/kg (2.75 - 2.80 animals [29.5 -  
1039 31.1%]) and for substances with  $LD_{50} > 5000$  mg/kg (2.32 [19.5%] - 2.46 [20.5%] animals).  
1040 Mean ATC animal savings with the RC millimole regression were statistically significant



with the NHK NRU at dose-response = 2 for substances with  $2000 < LD_{50} \leq 5000$  mg/kg (0.38 [3.4%] animals) and for substances with  $LD_{50} > 5000$  mg/kg (2.34 animals [19.7%]). Using the RC rat-only weight regression excluding substances with specific mechanisms of toxicity, statistically significant animal savings were observed for both test methods and dose response slopes for substances with  $2000 < LD_{50} \leq 5000$  mg/kg (1.23 [11.0%] - 3.07 [25.8%] animals) and substances with  $LD_{50} > 5000$  mg/kg (3.79 [31.8%] - 4.38 [36.5%] animals). Animal savings were also statistically significant for substances with  $LD_{50} \leq 5$  mg/kg using the 3T3 NRU at dose-response slope = 8.3 (2.16 [24.0%]) and using the NHK NRU at dose-response slope = 2 (1.27 [13.5%]). Using the NRU  $IC_{50}$  values to estimate starting doses for the ATC refined animal use by producing approximately 0.6 to 0.7 fewer mean animal deaths than when the default starting dose of 300 mg/kg was used.

Spielmann et al. (1999) indicated that 76% (845/1115) of the industrial substances submitted to the Federal Institute for Health Protection of Consumers and Veterinary Medicine in Berlin, Germany, since 1982 had  $LD_{50} > 2000$  mg/kg. Thus, the selection of starting doses using the *in vitro* NRU methods may save a considerable number of animals since animal savings are highest for the least toxic substances. However, the extent to which these substances represent the world of substances in commerce is not known.

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## 11.0 PRACTICAL CONSIDERATIONS

The 3T3 and NHK NRU test methods are proposed as adjuncts, rather than replacements for, the *in vivo* acute oral toxicity assays. Data from these *in vitro* basal cytotoxicity test methods are used with a prediction model to estimate the rodent oral LD<sub>50</sub> of the test chemical. This LD<sub>50</sub> value is then used to determine the starting dose for subsequent *in vivo* acute oral toxicity assays. This section discusses practical issues involved in applying these two *in vitro* NRU cytotoxicity test methods to the prediction of starting doses for rodent acute systemic toxicity assays. Practical issues to consider for implementation of these cell culture test methods include the need for and availability of specialized equipment, training and expertise requirements, cost considerations, and time expenditure. Good Cell Culture Practice: ECVAM Good Cell Culture Practice Task Force Report 1 (Hartung et al. 2002) encourages the establishment of practices and principles that will reduce uncertainty in the development and application of *in vitro* test methods.

Good cell culture practices (in conjunction with good laboratory practices) are essential for all *in vitro* cytotoxicity testing and should be employed to ensure that data produced from the 3T3 and NHK NRU test methods are reproducible, reliable, credible, and acceptable.

### 11.1 Transferability of the 3T3 and NHK NRU Test Methods

Transferability of a test method is defined as the ability of a test method or procedure to be accurately and reliably performed in different, competent laboratories (ICCVAM 2003). Accuracy and reliability of these test methods are discussed in **Sections 6** and **7**, respectively.

Protocols for the 3T3 and NHK NRU test methods, solubility testing, and prequalification of keratinocyte growth medium have been optimized and are available on the ICCVAM/NICEATM website (<http://iccvam.niehs.nih.gov/methods/invitro.htm>). The protocols were designed with GLP-compliance in mind and can be easily implemented or adapted by scientists with the appropriate technical experience.

While *in vitro* and *in vivo* methods require some similar skills (e.g., preparation of solutions and test chemical doses, documentation), *in vitro* testing requires skills specific to cell culture systems (e.g., aseptic techniques, microscopic evaluation of cell cultures, propagation of cells in medium) but not to the maintenance, handling, or treatment of rodents.

#### 11.1.1 Facilities and Major Fixed Equipment

The following lists of facility requirements, equipment and supplies, and training and expertise are common to most *in vitro* mammalian cell culture laboratories. Required equipment and supplies are also described in the NICEATM/ECVAM validation study 3T3 and NHK NRU test method protocols (**Appendices B and C**), the *Guidance Document* (ICCVAM 2001b, **Appendix D**) and Hartung et al. 2002.

##### *Facility Requirements*

The testing facility should provide structures and infrastructures necessary for operating a scientific laboratory (e.g., laboratory space, access to utilities, shipping/receiving department [for appropriate receipt and handling of cell culture materials], etc.). Each facility should provide:

- personnel that are competent in performing *in vitro* cytotoxicity assays under aseptic laboratory conditions
- adequate facilities, equipment, and supplies
- proper health and safety guidelines
- satisfactory quality assurance procedures

Each facility should conform to all appropriate statutes (i.e., local, state, provincial, federal, national, international) concerning safety guidelines (e.g., general workplace safety guidelines, chemical handling and disposal guidelines, biohazard guidelines, etc.). Hartung et al. 2002 provides recommended safety guidelines for working with potentially infectious materials (e.g., HIV, hepatitis B, hepatitis C) and human materials (e.g., cells, tissues, fluids).

The facility management should establish scientific guidelines and procedures, train and supervise professional and technical staff, and evaluate results and performance within their

discipline area relative to the testing requirements. Personnel should have mandatory training in basic cell culture practice, in specific procedures for specialized culture procedures, and in specific safety practices appropriate to the types of materials that may be used in the laboratory (Hartung et al. 2002). The management should maintain records of the qualifications, training and experience, and job descriptions for each professional and technical individual involved in the testing.

### *Cell Culture Laboratory*

The testing facility should have a designated cell culture laboratory to ensure that *in vitro* cytotoxicity assays are performed under clean and proper aseptic conditions. The laboratory should be located such that through traffic is minimal to reduce possible disturbances that may compromise the cell culture assays. Room temperature of the laboratory should be regulated, monitored, and documented. Access to the laboratory and test chemicals should be restricted to appropriate personnel.

### *Major Equipment*

Each testing facility should have at a minimum the following equipment:

- incubator ( $37^{\circ}\text{C} \pm 1^{\circ}\text{C}$ ,  $90\% \pm 10\%$  humidity,  $5.0\% \pm 1\%$   $\text{CO}_2/\text{air}$ )
- laminar flow clean bench/cabinet (standard: "biological hazard")
- inverse phase contrast microscope
- 96-well plate spectrophotometric plate reader equipped with  $540 \text{ nm} \pm 10 \text{ nm}$  filter (if testing in 96-well plates)
- autoclave
- refrigerator
- freezer ( $-70^{\circ}\text{C}$ )
- liquid nitrogen
- cryogenic freezer/storage unit
- computer

Equipment maintenance and calibration should be routinely performed and documented as per GLP guidelines and testing facility procedures.

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128 11.1.2 Availability of Other Necessary Equipment and Supplies129 *General Equipment*

130 Each testing facility should have at a minimum the following equipment:

- 131 • centrifuge
- 132 • waterbath
- 133 • pipettors
- 134 • balance
- 135 • pH meter
- 136 • cell counting system
- 137 • water bath sonicator
- 138 • magnetic stirrer
- 139 • vortex mixer
- 140 • antistatic bar ionizer

141

142 Equipment maintenance and calibration should be routinely performed and documented as  
143 per GLP guidelines and testing facility procedures. These types of equipment are available  
144 from scientific and laboratory supply companies (e.g., Fisher Scientific, Thomas Scientific,  
145 etc.).

146

147 *General Cell Culture Materials and Supplies*

148 The following supplies are needed for the NRU test methods:

- 149 • tissue culture plasticware
- 150 • glassware
- 151 • sterile filtration systems
- 152 • culture medium and supplements
- 153 • serum
- 154 • balanced salt solutions
- 155 • NRU assay chemicals

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Cell culture supplies are generally available through the major scientific and laboratory supply companies and through specialty companies (e.g., GIBCO, SIGMA-Aldrich, CAMBREX/Biowhittaker, Becton Dickinson, etc.). Compositions of culture media, supplements/additives, salt solutions, NRU assay chemicals and the volumes needed for the test methods should be defined. All culture vessels needed to assure proper cell propagation should be defined.

During this study, obtaining an adequate supply of NHK medium was problematic for FAL. Communication between the UK distributor and the laboratory was uneven and the SMT intervened on several occasions in an attempt to resolve the supply issue. This illustrates the need for additional sources of keratinocyte cell culture medium. Periodically, it was also difficult to obtain NHK medium and supplements that adequately supported keratinocyte growth similarly in all the laboratories. Although the purchased medium met the manufacturer's QA/QC standards, certain lots of the medium and supplements did not support the growth of NHK cells to the extent needed to meet the growth characteristics required by the test method protocol. This necessitated the need to incorporate an NHK medium prequalification protocol into the study. Prequalification of medium is recommended to avoid unnecessarily repeating studies.

#### *Cell Cultures*

3T3 Mouse Fibroblasts: BALB/c 3T3 cells, clone 31, can be obtained from national/international cell culture repositories (e.g., CCL-163, American Type Culture Collection [ATCC], Manassas, VA).

Normal Human Epidermal Keratinocytes (NHK): non-transformed keratinocyte cells from cryopreserved primary or secondary cells can be obtained from national/international cell culture repositories (e.g., CAMBREX Bio Science, 8830 Biggs Ford Road, Walkersville, MD) or isolated from donated tissue (using proper collection, preparation, and propagation techniques).

Obtaining adequate supplies of keratinocytes may be difficult since preparing a pool of cells depends on the availability of tissue donors. Procurement of a commercially available stock pool of cells and storing them indefinitely in a cryogenics freezer is recommended.

## **11.2 3T3 and NHK NRU Test Method Training Considerations**

### **11.2.1 Required Training and Expertise**

Hartung et al. 2002 recommends that scientists involved in *in vitro* testing should have training in basic cell culture aspects such as: sterile technique, handling culture media, feeding cultures, cell counting, subculture (trypsinization), detection and elimination of contamination, growth parameters, growth curves, viability assays, storage and freezing/thawing of cells. Additionally, training is encouraged for special culture procedures such as: primary cell and tissue cultures, toxicity testing, viability assays, cloning, transfection, expression cloning, cell transformation and immortalization, and virus propagation and isolation. Laboratory personnel should be trained in the application of GLP requirements (see **Section 8.1.1**).

#### *Training and Expertise*

*In vitro* NRU cytotoxicity test methods require personnel trained specifically in sterile tissue/cell culture techniques and general laboratory procedures. Performance of the test methods requires a relatively moderate degree of technical capability and a high degree of skill in monitoring and maintaining appropriate cell growth conditions, troubleshooting potential and real problems in culture systems, and interpreting and analyzing cytotoxicity data. Each individual engaged in the conduct of or responsible for the supervision of a study shall have education, training, and experience, or combination thereof, to enable that individual to perform the assigned duties. The NRU test methods do not require that personnel be trained to perform *in vivo* testing.

#### *Specific Training and Expertise Needed for the In Vitro NRU Cytotoxicity Test Methods*

Personnel involved in performing the *in vitro* NRU cytotoxicity test methods should be well experienced in general cell culture techniques and should be able to:

- work with cryogenic freezing apparatus
- pipette solutions with large volume pipettors and multi-channel pipettors
- establish cells in culture vessels under aseptic conditions and monitor growth; recognize normal and abnormal cell growth characteristics; document observations of cell cultures throughout all aspects of the cultures
- perform the *in vitro* assays by following the protocols to: grow the cells, treat the cells with test chemicals, perform the NRU assay, measure endpoints (i.e., optical density measurements), transfer data to electronic templates
- operate equipment necessary for maintaining cell culture laboratories (e.g., incubators, biohazard hoods, spectrophotometric microtiter plate readers)

#### *General Laboratory Expertise Needed for the In Vitro NRU Cytotoxicity Test Methods*

Personnel should also be able to perform and understand basic laboratory techniques and laboratory management:

- prepare cell culture solutions (e.g., culture medium, NRU solutions); measure pH; know proper storage conditions and maintain proper documentation
- prepare test chemicals for application to cell culture test plates; follow solubility protocols to adequately prepare test chemicals in solution; recognize solubility issues (e.g., insolubility nature of chemical, precipitation) and implement mechanical procedures for solubilizing the test chemicals
- monitor and control laboratory room conditions (e.g., temperature, humidity, lighting, traffic); maintain equipment at conditions essential to cell cultures (e.g., temperature, humidity, gas flow, calibrations)

#### *Personnel Needed to Perform the In Vitro NRU Cytotoxicity Test Methods*

- Study Director: the single point of study control; has the overall responsibility for the technical conduct of the testing (e.g., GLP adherence); determines test acceptance, provides SOPs, interprets and analyzes the data, documents testing aspects, and produces all written reports.
- Quality Assurance Officer: monitors the testing to assure conformance with GLP requirements; must be independent of the Study Director.

- Laboratory Technician(s): individuals trained in sterile tissue/cell culture techniques and general laboratory procedures and capable of performing the *in vitro* NRU cytotoxicity test methods in a GLP-manner.

#### 11.2.2 Training Requirements to Demonstrate Proficiency

Laboratories set their own criteria for proficiency, but in general, personnel should be able to understand the protocol, carry out the protocol with guidance from an experienced supervisor/trainer, and then carry out the protocol with no supervision. An experienced supervisor determines when a technician is adequately trained since there is no precise level of training that can be measured. Once the technician demonstrates competence in executing all the aspects of the *in vitro* NRU cytotoxicity test method(s), it is appropriate to initiate routine assessments of observations among personnel using a benchmark control test substance (SLS for these two NRU test methods) to ensure consistency.

The laboratories in this study were experienced in performing *in vitro* cytotoxicity assays but were required to train and develop additional skills through Phases I and II (e.g., data collection and transfer to Excel<sup>®</sup> and PRISM<sup>®</sup> templates). Inexperienced laboratory personnel were trained by completion of “training” NRU assays using SLS. In the early phases of the ICCVAM/ECVAM validation study, the laboratories continued training by the testing of coded reference chemicals of various toxicities and performing solubility testing on the chemicals. This training improved proficiency among the staff of the laboratories for the final phase of the validation study.

#### *GLP-Compliance Proficiency Criteria*

ECBC and IIVS conducted this study in compliance with GLP Standards (see **Section 8.1.1**). The appropriate QA unit (as per GLPs) reviewed the various aspects of the study and issued a QA statement that identified whether the methods and the results described in the Final Report accurately followed the test method protocol and reflected the raw data produced during the study, respectively, and provided assurance that all testing was done under the principles of GLP. FAL (non GLP-adherent) followed GLP standards referenced in **Section**

279 **8.1.1** as guidelines for conducting this study. FAL had no QA unit to judge their compliance  
280 with GLP guidelines.

### 282 **11.3 Test Method Cost Considerations**

#### 284 11.3.1 3T3 and NHK NRU Test Methods

##### 285 *Laboratory Costs*

286 Supplies such as cell culture chemicals, the reagents used to measure NRU, and cell culture  
287 plasticware are available from numerous suppliers and are not cost prohibitive. Major  
288 instruments and equipment that *in vitro* cytotoxicity laboratories need to implement the *in*  
289 *vitro* NRU cytotoxicity test methods are described in **Section 11.1.1**.

291 The 3T3 NRU test method is generally less expensive to use than the NHK NRU test  
292 method. One vial of the immortalized 3T3 cells (\$180) can be propagated indefinitely by  
293 passaging cells and periodically cryopreserving pools (i.e., numerous vials of cells). NHK  
294 cells require a fresh sample of primary cells for each test run (\$380 per vial). Since primary  
295 NHK cells are only passaged once after initiating into culture, there are no cells available to  
296 cryopreserve a stock pool of cells. The D-MEM medium used for the 3T3 cells is less  
297 expensive, more “generic”, and more readily available than keratinocyte-specific medium.  
298 (See **Table 11-1**)

**Table 11-1 Costs for Cell Culture Materials and Commercial Laboratory *In Vitro* Cytotoxicity Testing**

Item	Cost (approximate)	Number of Tests Possible	Other
3T3 Cells	\$180/vial <sup>1</sup>	indefinite	One vial can produce an indefinite supply of cells by propagating the cells in culture and periodically freezing a pool of cells.
NHK Cells	\$380/vial <sup>1</sup>	~5 (96-well plates)	Since cells are passaged only once beyond cryopreservation, new ampules should be thawed frequently to maintain continuous testing.
Dulbeccos' Minimum Essential Medium (D-MEM) with supplements	\$20/500mL <sup>1</sup>	~15 (96-well plates)	Establish cells in culture (~20 mL/vial of cells; 60 mL/3 vials), seed cells in 96-well plates (12 mL/plate; 180 mL/15 plates); prepare stock solution and eight concentration dilutions (~20 mL/chemical; 300 mL/15 plates).
NHK Medium with supplements	\$80/500 mL <sup>1</sup>	~15 (96-well plates)	Same as DMEM (above)
Commercial Laboratory Testing (MB Research Laboratories)	\$1050/\$1950 (USP/ISO) per 3 test materials <sup>2</sup>	1 test/material	<i>in vitro</i> NRU cytotoxicity test (24-hour test period)
Commercial Laboratory Testing (Institute for In Vitro Sciences))	\$1120 (GLP) per test material (minimum of 5 materials) <sup>2</sup>	1 range finder, 2 definitive tests per test material	<i>in vitro</i> NRU cytotoxicity test (48-hour test period)
Commercial Laboratory Testing (Institute for In Vitro Sciences))	\$1850 (GLP) per single test material <sup>2</sup>	1 range finder, 2 definitive tests per test material	<i>in vitro</i> NRU cytotoxicity test (48-hour test period)

<sup>1</sup>catalogue price

<sup>2</sup>personal communication

### *Commercial Testing Laboratories*

A representative of MB Research Laboratories (Spinnerstown, PA, <http://www.mbresearch.com/>) provided a quote (personal communication 2005) for an *in vitro* NRU cytotoxicity test (24-hour [and not a 48-hour] test period) of \$1050/\$1950 (USP/ISO) per set of three test chemicals. The lead laboratory for the NICEATM/ECVAM study, IIVS (Gaithersburg, MD, <http://www.iivs.org/>) provides commercial laboratory GLP-compliant testing using this study's protocols (48-hour test period) at a cost of \$1120 - \$1850 per chemical/sample (personal communication with Hans Raabe [IIVS] 2005).

### 11.3.2 *In Vivo* Rodent Acute Oral Toxicity Testing

**Table 11-2** provides commercial prices for acute oral systemic toxicity testing.

MB Research Laboratories performs the UDP test at a cost of \$750 for three rats and charges \$250 for each additional rat needed. In the best-case scenario, the UDP test needs only three rats (\$750). In the worst-case scenario, this test would need an additional 12 rats (15 maximum for the test); the total cost of the test would be \$3750. In this costing strategy, \$250 is saved from the total cost of the UDP for each rat saved by using the 3T3 or NHK NRU test method to predict the starting dose. Considering that adding the *in vitro* NRU cytotoxicity test costs from \$350 to \$1850 per chemical, the NRU test does not provide cost savings if fewer than two to six animals are saved.

The President of Product Safety Laboratories (Dayton, NJ, <http://www.productsafetylabs.com/>), Gary Wnorowski, provided a cost quote of \$2700 for determination of an LD<sub>50</sub> value using the UDP test; the cost is independent of the number of rats that are needed. Each testing dose is administered ~24-48 hours after the previous dose and each animal test generally does not exceed four days. Time involved in providing the LD<sub>50</sub> value is approximately three months (initiation of the test to provision of the final report). Knowing the estimated LD<sub>50</sub> value does not affect the cost of the *in vivo* test in this case but could reduce the number of animals needed for the test.

Bio Research Laboratories (BRL) performs the Acute Oral Rat Toxicity Test bioassay to determine the relative acute toxicity of an unknown substance. The method determines lethality and signs of acute toxicity from a waste sample administered in a single dose by gavage to a limited number of rats. The bioassay determines if the test sample exhibits a median lethal dose (LD<sub>50</sub>) either greater than or less than a regulatory threshold corresponding to a hazardous waste designation (i.e., 5000, 500, 50 mg/kg). A minimum of ten rats is used at the tested dosage for the pertinent regulatory threshold value that is relevant to the test sponsor. Knowledge of the estimated LD<sub>50</sub> does not reduce animal use or test costs if a single predetermined dose is tested.

345 **Table 11-2 Commercial Prices for Conducting *In Vivo* Acute Toxicity Testing**

Test	GLP-Compliant	Non GLP-Compliant	Company
Acute Oral Toxicity UDP: Limit Test - 2000 mg/kg	\$1200	\$1000	Product Safety Laboratories (PSL)
Acute Oral Toxicity UDP: Limit Test - 5000 mg/kg	\$800	\$650	PSL
Acute Oral Toxicity UDP: LD <sub>50</sub>	\$2700	\$2200	PSL <sup>a</sup>
Acute Oral Rat Toxicity: single dose <sup>b</sup>	\$950	NA	Bio Research Laboratories (BRL)
Acute Oral Rat Toxicity: two doses <sup>b</sup>	\$1500	NA	BRL
Acute Oral Rat Toxicity: LD <sub>50</sub>	\$3000	NA	BRL
Acute Oral Toxicity – UDP	\$730 for the first 3 animals; \$250 each additional animal	NA	MB Research Laboratories <sup>a</sup>

346 <sup>a</sup>provided to NICEATM through personal communication

347 <sup>b</sup>Washington State Biological Testing Methods #80-12 For the Designation of Dangerous Waste; Part B: Acute  
 348 Oral Rat Toxicity Test [<http://www.ecy.wa.gov/pubs/80012.pdf>] The method is an adaptation of the EPA  
 349 Health Affects Test Guidelines OPPTS 870.110 Acute Oral Toxicity and American Society for Testing and  
 350 Materials (ASTM) methods E 1163-90 (Standard test method for estimating acute oral toxicity in rats) and E  
 351 1372-90 (Standard test method for conducting a 90-day oral toxicity study in rats).  
 352

353 **11.4 Time Considerations for the 3T3 and NHK NRU Test Methods**354 *The 3T3 NRU Test Method*

355 Approximately one week is needed to thaw cryopreserved 3T3 cells, propagate the cells in  
 356 flasks, and passage/subculture the cells at least two times before subculturing to the 96-well  
 357 test plate. After subculture into 96-well plates, the cells are incubated another 24 hours to  
 358 reach the proper percentage of confluency, and then exposed to test chemical for 48 hours.  
 359 The entire 3T3 NRU assay process takes approximately 10 days. However, once the cells are  
 360 established in culture, they can be passaged for approximately two months before starting the  
 361 initial propagation from frozen stock. Multiple chemicals can be tested at the same time, and  
 362 different tests can overlap each other; thus, many chemicals can be tested in a relatively short  
 363 time.  
 364

365 *The NHK NRU Test Method*

366 Approximately one week is needed to thaw cryopreserved NHK cells, propagate the cells in  
 367 flasks, and passage/subculture the cells (once) directly to the 96-well test plate. After  
 368 subculture into 96-well plates, the cells are incubated another 48-72 hours to reach the proper  
 369



percentage of confluence and then exposed to test chemical for 48 hours. The entire NHK NRU assay process (range finder or definitive test) requires approximately 11-12 days. Cells can be seeded at different densities in the culture flasks so that passaging the cultures can take place on different days. Once the cells are established in culture, they are passaged once to the 96-well test plates. Multiple chemicals can be tested at the same time, and different tests can overlap each other; thus, many chemicals can be tested in a relatively short time.

### *In Vivo Testing*

According to guidelines for acute oral toxicity testing for the main test and limit dose test, single animals or groups of animals are dosed in sequence, usually at 2-4 day intervals, and observations are generally made for up to 14 days (for animals that are not moribund) (EPA 2002a; OECD 2001a; OECD 2001b, OECD 2001c). The addition of NRU testing to estimate a starting dose prior to the implementation of the UDP main test or limit dose test will take 10-12 days, but could save up to 14 days of observation for every animal saved.

## **11.5 Summary**

- All equipment and supplies are readily available. Direct communication with the NHK medium supplier assured that specific lots of medium were available to the laboratories. The test methods should be easily transferable to laboratories experienced with mammalian cell culture methods.
- Much of the training and expertise needed to perform the 3T3 and NHK NRU test methods are common to all mammalian cell culturists. Additional technical training would not be intensive since there are no extraordinary techniques needed and these test methods are similar in general performance to other *in vitro* mammalian cell culture assays. GLP training should be provided to technicians to ensure proper adherence to protocols and documentation procedures.
- Price levels for commercial testing for one chemical are \$1120 to \$1850 (**Table 11-2**) for *in vitro* NRU cytotoxicity testing to determine the IC<sub>50</sub> (IIVS, personal communication) versus \$750 - \$3750 (**Table 11-2**) for *in vivo* rat acute oral testing for LD<sub>50</sub> determination. Comparison of costs of the *in vitro* testing to *in*

401                *vivo* testing is difficult since the *in vitro* NRU cytotoxicity test methods are not  
402                replacements for the animal testing. Use of these test methods may not  
403                necessarily reduce the overall cost of the *in vivo* rat acute oral toxicity test but  
404                can reduce the number of animals needed for a study.  
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## 13.0 GLOSSARY<sup>1</sup>

**Accuracy<sup>2</sup>:** (a) The closeness of agreement between a test method result and an accepted reference value. (b) The proportion of correct outcomes of a test method. It is a measure of test method performance and one aspect of “relevance”. Accuracy is highly dependent on the prevalence of positives in the population being examined.

**Acute Toxic Class (ATC) method:** An acute oral systemic toxicity test method based on testing groups of animals at fixed doses in a sequential manner. The lethality outcomes are used to classify a test substance into the appropriate GHS acute oral toxicity category.

**Adjusted R<sup>2</sup>:** R<sup>2</sup> values that are adjusted for the relative proportion of data points to explanatory variables.  $\text{Adjusted } R^2 = 1 - (1 - R^2)[(n - 1)/(n - k - 1)]$  where k = number of independent variables and n = number of observations. See “coefficient of determination.”

**ANOVA:** One-way (and two-way) analysis of variance. ANOVA compares the measurements (continuous variables) of three or more groups when the data are categorized in one way (one-way) or two ways (two-way). ANOVA assumes that the populations compared are normally distributed and that the variances for the groups to be compared are approximately equal.

**Assay<sup>2</sup>:** The experimental system used. Often used interchangeably with “test” and “test method.”

**Biphasic dose-response:** Dose-response in which cytotoxicity increases (as dose increases), plateaus, and then increases again. See **Section 2.6.3**.

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<sup>1</sup> The definitions in this Glossary are restricted to their uses with respect to *in vitro* cytotoxicity testing and the NRU test methods.

<sup>2</sup> Definition used by the Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM 2003).

**Category prediction:** The GHS hazard category that includes the predicted LD<sub>50</sub> value for a test chemical.

**Coded substances:** Substances labeled by code rather than name so that they can be tested and evaluated without knowledge of their identity or anticipation of test results. Coded substances are used to avoid intentional or unintentional bias when evaluating laboratory or test method performance.

**Coefficient of variation:** A statistical representation of the precision of a test. It is expressed as a percentage and is calculated as follows:

$$\left( \frac{\text{standard deviation}}{\text{mean}} \right) \times 100\%$$

**Coefficient of determination:** In linear regression, it denotes the proportion of the variance in Y and X that is shared. Its value ranges between zero and one and it is commonly called called “R<sup>2</sup>.” For example, R<sup>2</sup> = 0.45, indicates that 45% of the variance in Y can be explained by the variation in X and that 45% of the variance in X can be explained by the variation in Y.

**Concordance<sup>2</sup>:** The proportion of all substances tested that are correctly classified as positive or negative. It is a measure of test method performance and one aspect of “relevance.” The term is often used interchangeably with “accuracy.” Concordance is highly dependent on the prevalence of positives in the population being examined. In the NICEATM/ECVAM study, concordance was used to describe the proportion of test substances that were correctly classified into GHS acute oral toxicity hazard categories, or to describe the proportion of test substances for which the laboratories obtained the same classification result.

**Confluency:** A state in which cells in culture come into contact with other cells in the same culture to form a complete sheet of cells (monolayer). For this study, confluency is determined as a percentage of cell coverage of the tissue culture vessel growth surface (e.g., cell monolayer has 80% confluency).

**Cytotoxicity:** The adverse effects resulting from interference with structures and/or processes essential for cell survival, proliferation, and/or function. For most chemicals, toxicity is a consequence of non-specific alterations in "basal cell functions" (i.e., via mitochondria, plasma membrane integrity, etc.), which may then lead to effects on organ-specific functions and/or death of the organism. These effects may involve the integrity of membranes and the cytoskeleton, cellular metabolism, the synthesis and degradation or release of cellular constituents or products, ion regulation, and cell division.

**Definitive test:** The main test of the cytotoxicity assay for determining the  $IC_{50}$ . The concentration closest to the range finder test  $IC_{50}$  serves as the midpoint of the concentrations tested in a definitive test. Compared to the range finder test, the definitive test uses a smaller dilution factor for the concentrations tested.

**Discordant chemicals:** Chemicals for which the  $LD_{50}$  is not accurately predicted by the  $IC_{50}$  (and the associated regression formula) or the GHS toxicity category is not accurately predicted by the  $IC_{50}$  (and the associated regression formula). Also referred to as "outliers."

**EDIT:** Evaluation-guided Development of New *In vitro* Test Batteries. An international project coordinated by the Scandinavian Society for Cell Culture to develop new *in vitro* tests for toxicity and toxicokinetics to be incorporated into test batteries for predicting acute and chronic systemic toxicity.

**Endpoint<sup>2</sup>:** The biological process, response, or effect assessed by a test method.

**Fixed Dose Procedure (FDP):** An acute oral systemic toxicity test method based on testing groups of animals at fixed doses. Evident toxicity outcomes are used to classify a test substance into the appropriate GHS acute oral toxicity category.

**F<sub>G</sub>:** An empirical factor for the RC regression line that represents the expected precision of LD<sub>50</sub> predictions from basal cytotoxicity data. The LD<sub>50</sub> values of 73% of the 347 RC chemicals are localized in the dose range around the RC regression line by  $F_G \leq \log 5$ . The factor represents the expected difference between the LD<sub>50</sub> determined in animal experiments and the LD<sub>50</sub> estimated from the IC<sub>50</sub> on the RC regression line.

**Geometric mean:** The antilog of the mean of the logarithm of the values. It is less affected by extreme values than the arithmetic mean.

**Globally Harmonized System (GHS):** A classification system presented by the United Nations that provides (a) a harmonized criteria for classifying substances and mixtures according to their health, environmental and physical hazards, and (b) a harmonized hazard communication elements, including requirements for labeling and safety data sheets.

**Good Laboratory Practices (GLP)<sup>2</sup>:** Regulations promulgated by the U.S. Food and Drug Administration and the U.S. Environmental Protection Agency, and principles and procedures adopted by the Organization for Economic Cooperation and Development and Japanese authorities that describe record keeping and quality assurance procedures for laboratory records that will be the basis for data submissions to national regulatory agencies.

**Guidance Document:** *Guidance Document on Using In Vitro Data to Estimate In Vivo Starting Doses for Acute Toxicity* (ICCVAM 2001b).

**Hazard<sup>2</sup>:** The potential for an adverse health or ecological effect. A hazard potential results only if an exposure occurs that leads to the possibility of an adverse effect being manifested.

**Hill function:** The IC<sub>50</sub> values are determined from the concentration-response using a Hill function which is a four parameter logistic mathematical model relating the concentration of the test chemical to the response (typically following a sigmoidal shape).

$$Y = \text{Bottom} + \frac{\text{Top} - \text{Bottom}}{1 + 10^{(\log \text{IC}_{50} - X) \text{HillSlope}}}$$

where Y= response, X is the logarithm of dose (or concentration), Bottom is the minimum response, Top is the maximum response, logIC<sub>50</sub> is logarithm of X at the response midway between Top and Bottom, and HillSlope describes the steepness of the curve.

**Hill function (revised):** Some unusual dose-responses did not fit the Hill function well. To obtain a better model fit, the Bottom parameter was estimated without constraints (the previous practice was to use Bottom = 0). However, when Bottom ≠ 0, the EC<sub>50</sub> reported by the Hill function was not the same as the IC<sub>50</sub> since the Hill function relies on EC<sub>50</sub> defined as the point midway between Top and Bottom. Thus, the Hill function calculation using the Prism® software was rearranged to calculate the concentration corresponding to the IC<sub>50</sub> as follows.

$$X = \log EC_{50} - \frac{\log\left(\frac{\text{Top} - \text{Bottom}}{Y - \text{Bottom}} - 1\right)}{\text{HillSlope}}$$

X is the logarithm of concentration at 50% response, logEC<sub>50</sub> is logarithm of concentration at the response midway between Top and Bottom, Top is the maximum response, Bottom is the minimum response, Y = 50 (i.e., 50% response), and HillSlope describes the steepness of the curve.

**IC<sub>50</sub>:** test chemical concentration producing 50% inhibition of the endpoint measured (i.e., cell viability).

**Interlaboratory reproducibility<sup>2</sup>:** A measure of whether different qualified laboratories using the same protocol and test substances can produce qualitatively and quantitatively

similar results. Interlaboratory reproducibility is determined during the prevalidation and validation processes and indicates the extent to which a test method can be transferred successfully among laboratories.

**Intralaboratory repeatability<sup>2</sup>:** The closeness of agreement between test results obtained within a single laboratory when the procedure is performed on the same substance under identical conditions within a given time period.

**Intralaboratory reproducibility<sup>2</sup>:** The first stage of validation; a determination of whether qualified people within the same laboratory can successfully replicate results using a specific test protocol at different times.

***In vitro*:** In glass. Refers to assays that are carried out in an artificial system (e.g., in a test tube or petri dish) and typically use single-cell organisms, cultured cells, cell-free extracts, or purified cellular components.

***In vivo*:** In the living organism. Refers to assays performed in multicellular organisms.

**K<sub>ow</sub>:** Octanol:water partition coefficient.

**LC<sub>50</sub>:** Acute lethal serum or blood concentrations.

**LD<sub>50</sub>:** The calculated value of the oral dose that produces lethality in 50% of test animals (rats and mice). The LD<sub>50</sub> values serve as reference values for the *in vitro* tests.

**LD<sub>50</sub> (initial):** Acute oral rat and mouse LD<sub>50</sub> values used during the chemical selection process. For RC chemicals, LD<sub>50</sub> values were those used in the RC regression, which were largely from the 1983/84 RTECS®. For chemicals that were not included in the RC, the initial LD<sub>50</sub> values came from HSDB or 2002 RTECS®.

**LD<sub>50</sub> (reference):** Acute oral rodent LD<sub>50</sub> values from rats and mice were located through literature searches and references from major toxicity databases such as RTECS®. Studies were reviewed to identify the most appropriate LD<sub>50</sub> values for each chemical. Values obtained using feral animals, preanesthetized animals, or animals less than 4 weeks of age were not used. Values reported as inequalities were not used. Reference LD<sub>50</sub> values were determined by calculating the geometric mean of the acceptable LD<sub>50</sub> values. Data were used in generation of the 3T3 and NHK NRU regressions.

**Maximum:minimum value:** Ratio of minimum acceptable LD<sub>50</sub> to maximum acceptable LD<sub>50</sub>.

**MEIC:** Multicentre Evaluation of *In Vitro* Cytotoxicity. An international effort established by the Scandinavian Society for Cell Toxicology and initiated in 1983 to evaluate the relationship and relevance of *in vitro* cytotoxicity for predicting the acute toxicity of chemicals in humans.

**Millimolar regressions:** Linear regressions with IC<sub>50</sub> values in mmol/L and LD<sub>50</sub> values in mmol/kg.

**Negative control:** An untreated sample containing all components of a test system, except the test substance solvent, which is replaced with a known non-reactive material, such as water. This sample is processed with test substance-treated samples and other control samples to determine whether the solvent interacts with the test system.

**Neutral red (NR):** A weakly cationic water-soluble dye that stains living cells by readily diffusing through the plasma membrane and concentrating in lysosomes where it electrostatically binds to the anionic lysosomal matrix.

**Neutral red uptake (NRU):** Concentration of neutral red dye in the lysosomes of living cells. Altering the cell surface or the lysosomal membrane by a toxicological agent causes lysosomal fragility and other adverse changes that gradually become irreversible. The NRU

test method makes it possible to distinguish between viable, damaged, or dead cells because these changes result in decreased uptake and binding of NR measurable by optical density absorption readings in a spectrophotometer.

**NHK:** Normal Human epidermal Keratinocytes (from neonatal foreskin).

**Optical density (OD):** The absorption (i.e., OD measurement) of the resulting colored solution (colorimetric endpoint) in the NRU assay measured at 540 nm  $\pm$  10 nm in a spectrophotometric microtiter plate reader using blanks as a reference

**Outlier:** For any measurement, an extreme value in the NICEATM/ECVAM study was referred to as an “outlier” if it passes a statistical test for outliers at the 99% level. With respect to chemicals, it refers to chemicals that do not fit (using the specified criteria) an IC<sub>50</sub>-LD<sub>50</sub> linear regression model. It may also refer to chemicals for which the predicted GHS toxicity category does not match the reference *in vivo* GHS toxicity category.

**Performance<sup>2</sup>:** The accuracy and reliability characteristics of a test method (see “accuracy”, “reliability”).

**pH:** A measure of the acidity or alkalinity of a solution. pH 7.0 is neutral; higher pHs are alkaline, lower pHs are acidic.

**Plate reader:** A spectrophotometric device for measuring light intensity as a function of color/wavelength (i.e., optical density/absorption at 540 nm  $\pm$  10 nm for NRU) in 96-well microtiter tissue culture plates.

**Positive control:** A sample containing all components of a test system and treated with a substance known to induce a positive response, which is processed with the test substance-treated and other control samples to demonstrate the sensitivity of each experiment and to allow for an assessment of variability in the conduct of the assay over time.



**Predictivity<sup>2</sup>:** Proportion of *in vivo* category matches for all substances with *in vitro* predictions for a particular category. Predictivity is an indicator of test accuracy.

**Protocol<sup>2</sup>:** The precise, step-by-step description of a test, including the listing of all necessary reagents, criteria and procedures for the evaluation of the test data.

**Quality assurance (QA)<sup>2</sup>:** A management process by which adherence to laboratory testing standards, requirements, and record keeping procedures is assessed independently by individuals other than those performing the testing.

**Range finder:** Initial test performed to determine starting doses for the main (definitive) test. The NRU assays test eight concentrations of the test chemical or the positive control (PC) by diluting the stock solution in log dilutions to cover a large concentration range.

**RC regression:**  $\log(\text{LD}_{50}) = 0.435 \times \log(\text{IC}_{50}) + 0.625$ ; for estimating an  $\text{LD}_{50}$  value in mmol/kg (body weight) from an  $\text{IC}_{50}$  value (in mM).

**Reduction alternative<sup>2</sup>:** A new or modified test method that reduces the number of animals required.

**Reference substances:** Substances selected for use during the research, development, prevalidation, and validation of a proposed test method because their response in the *in vivo* reference test method or the species of interest is known (see “reference test”). Reference substances should represent the classes of chemicals for which the proposed test method is expected to be used and cover the range of expected responses (negative, weak to strong positive).

**Reference test method<sup>2</sup>:** The accepted *in vivo* test method used for regulatory purposes to evaluate the potential of a test substance to be hazardous to the species of interest.

**Refinement alternative<sup>2</sup>:** A new or modified test method that refines procedures to lessen or eliminate pain or distress in animals or enhances animal well-being.

**Registry of Cytotoxicity (RC):** Database that consists of *in vivo* acute oral toxicity data (i.e., LD<sub>50</sub> values) from rats and mice and *in vitro* cytotoxicity data (i.e., IC<sub>50</sub> values) from multiple cell lines and cytotoxicity endpoints for 347 chemicals with known molecular weights (Halle 1998). A regression model constructed from these data was proposed by ZEBET, as a method to reduce animal use by identifying the most appropriate starting doses for acute oral systemic toxicity tests

**Relevance<sup>2</sup>:** The extent to which a test method correctly predicts or measures the biological effect of interest in humans or another species of interest. Relevance incorporates consideration of the “accuracy” or “concordance” of a test method.

**Reliability<sup>2</sup>:** A measure of the degree to which a test method can be performed reproducibly within and among laboratories over time. It is assessed by calculating intra- and inter-laboratory reproducibility and intralaboratory repeatability.

**Replacement alternative<sup>2</sup>:** A new or modified test method that replaces animals with nonanimal systems or one animal species with a phylogenetically lower one (e.g., a mammal with an invertebrate).

**Reproducibility<sup>2</sup>:** The consistency of individual test results obtained in a single laboratory (intralaboratory reproducibility) or in different laboratories (interlaboratory reproducibility) using the same protocol and test substances (see intra- and inter-laboratory reproducibility).

**RTECS®:** Registry of Toxic Effects for Chemical Substances. Compendium of data extracted from the open scientific literature. The database includes toxicity data (e.g., acute toxicity) and specific numeric toxicity values (e.g., LD<sub>50</sub>). Compiled by the U.S. National Institute for Occupational Safety and Health (NIOSH) and now licensed to MDL Information Systems, Inc.

**Sensitivity<sup>2</sup>:** The proportion of all positive substances that are classified correctly as positive in a test method. It is a measure of test method accuracy.

**Simulation modeling:** Computer simulation modeling of the acute systemic toxicity assays to determine animal use. The simulation process uses a simulated population of animals for testing, a reference endpoint (i.e., “true” LD<sub>50</sub> value), and its assumed log-normal distribution. Morality is assumed to have a mean equal to the log of the true LD<sub>50</sub>. The SD, which reflects the variability of the simulated population, is the inverse of the slope of the dose-mortality curve. Due to a lack of information for the real dose-mortality curve, the simulations assumed slopes of 0.5, 0.8, 2, 4, and 8.3.

**Solubility:** The amount of a test substance that can be dissolved (or thoroughly mixed with) culture medium or solvent. The solubility protocol was based on a U.S. EPA guideline (EPA 1998) that involves testing for solubility in a particular solvent, beginning at a relatively high concentration and proceeding to successively lower concentrations by adding more solvent as necessary for dissolution. Testing stops when, upon visual observation, the procedure produces a clear solution with no cloudiness or precipitate.

**Solvent control:** An untreated sample containing all components of a test system, including the solvent that is processed with the test substance-treated and other control samples to establish the baseline response for the samples treated with the test substance dissolved in the same solvent. When tested with a concurrent negative control, this sample also demonstrates whether the solvent interacts with the test system.

**Specificity<sup>2</sup>:** The proportion of all negative substances that are classified correctly as negative in a test method. It is a measure of test method accuracy.

**Spirit of GLP:** Guidance provided in the Statement of Work specifically for the non GLP-compliant laboratory that participated in the validation study. Based on the GLP standards referenced in the ECVAM Workshop 37 Report (Cooper-Hannan 1999) and the OECD Principles of GLP (OECD 1998). “Laboratories that are non GLP-compliant shall adhere to

GLP principles and other method parameters. Documentation and accountability shall be equal to GLP requirements. Laboratories must make assurances that they are equal in performance criteria and that there is parity amongst the laboratories.”

**TESS:** Toxic Exposure Surveillance System. A comprehensive poisoning surveillance database maintained by the American Association of Poison Control Centers (AAPCC).

**Test<sup>2</sup>:** The experimental system used; used interchangeably with “test method” and “assay”.

**Test method<sup>2</sup>:** A process or procedure used to obtain information on the characteristics of a substance or agent. Toxicological test methods generate information regarding the ability of a substance or agent to produce a specified biological effect under specified conditions. Used interchangeably with “test” and “assay”. See also “validated test method” and “reference test”.

**Test method component:** Structural, functional, and procedural elements of a test method that are used to develop the test method protocol. These components include unique characteristics of the test method, critical procedural details, and quality control measures.

**3T3:** BALB/c 3T3 clone A31 mouse fibroblasts developed in 1968 from disaggregated 14- to 17-day-old BALB/c mouse embryos (American Type Culture Collection [ATCC]; # CCL-163).

**Tiered testing:** A testing strategy where all existing information on a test substance is reviewed, in a specified order, before *in vivo* testing.

**Toxicity underpredicted:** Actual LD<sub>50</sub> value of a test substance is lower than the predicted LD<sub>50</sub> value.

**Toxicity overpredicted:** Actual LD<sub>50</sub> value of a test substance is higher than the predicted LD<sub>50</sub> value.

**Transferability<sup>2</sup>:** The ability of a test method or procedure to be accurately and reliably performed in different, competent laboratories.

**Up-and-Down Procedure (UDP):** An acute oral systemic toxicity test method used to minimize the number of animals required to estimate the acute oral toxicity of a chemical, estimate the LD<sub>50</sub> and confidence intervals (CI), and observe signs of toxicity. Single animals are tested sequentially. Subsequent doses are based on the outcome of the previous animal.

**Validated test method<sup>2</sup>:** An accepted test method for which validation studies have been completed to determine the accuracy and reliability of this method for a specific proposed use.

**Validation<sup>2</sup>:** The process by which the reliability and accuracy of a procedure are established for a specific purpose.

**Vehicle control (VC):** The VC consists of appropriate cell culture medium for the cells in the test (i.e., DMEM for 3T3 cells and keratinocyte growth medium for the NHK cells). For chemicals dissolved in DMSO, the VC consists of medium with the same amount of solvent as that used in the test chemical concentrations that are applied to the 96-well test plate. The final DMSO concentration is  $\leq 0.5$  % (v/v) in the VCs.

**Volatility:** Ability of a test chemical to evaporate. A general indicator of volatility issues in the NRU test methods is the percent difference in the mean OD values for the two VC columns on the test plate. If the difference is greater than 15%, then chemical volatility can be suspected, especially if the VC adjacent to the highest test concentration had a significantly reduced OD value. Volatility may be an issue for compounds with a specific gravity of less than 1.

**Weight of evidence (process):** The strengths and weaknesses of a collection of information are used as the basis for a conclusion that may not be evident from the individual data.

388 **Weight regressions:** Linear regressions with IC<sub>50</sub> values in µg/mL and LD<sub>50</sub> values in  
389 mg/kg.

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391 **ZEBET:** The German National Center for the Documentation and Evaluation of Alternative  
392 Methods to Animal Experiments.

393